## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060319

Entity Name: EAGLE INSURANCE OF SOUTH MIAMI, INC.

**Current Principal Place of Business:** 

9664 CORAL WAY MIAMI, FL 33165

**Current Mailing Address:** 

9664 CORAL WAY MIAMI, FL 33165

FEI Number: 20-2691735 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AREAS, EDUARDO 9257 SW 37 STREET MIAMI, FL 33165 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EDUARDO AREAS 02/28/2015

Electronic Signature of Registered Agent

Date

FILED Feb 28, 2015

**Secretary of State** 

CC4212146997

Officer/Director Detail:

Title S Title \

NameLACAYO, TATIANA LNameMEITE, MARIBELAddress9257 SW 37 STREETAddress9257 SW 37 STREET

City-State-Zip: MIAMI FL 33165 City-State-Zip: MIAMI FL 33165

Title P

Name AREAS, EDUARDO
Address 10375 SW 70 STREET
City-State-Zip: MIAMI FL 33173

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

V

SIGNATURE: MARIBEL MEITE

Electronic Signature of Signing Officer/Director Detail

02/28/2015

Date