

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000002581

Entity Name: INSURANCE QUOTE ZONE. INC.

Current Principal Place of Business:

18101 HIGHWOODS PRESERVE PKWY
SUITE 208
TAMPA, FL 33647

Current Mailing Address:

18101 HIGHWOODS PRESERVE PKWY
SUITE 208
TAMPA, FL 33647

FEI Number: 04-3787804

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEFEBVRE, PAUL J
17524 SANDGATE CT
LAND O LAKES, FL 34638 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name LEFEBVRE, PAUL J
Address 17524 SANDGATE CT
City-State-Zip: LAND O LAKES FL 34638

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.

SIGNATURE: PAUL LEFEBVRE

PRESIDENT

01/21/2014

Electronic Signature of Signing Officer/Director Detail

Date