## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000081589

Entity Name: ALL FLORIDA INSURANCE CLAIMS SERVICE, INC.

FILED Feb 06, 2015 Secretary of State CC3693814414

## **Current Principal Place of Business:**

14411 COMMERCE WAY 250

MIAMI LAKES, FL 33016

# **Current Mailing Address:**

14411 COMMERCE WAY 250

MIAMI LAKES, FL 33016 US

FEI Number: 26-1272319 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MUNOZ, JOSEPH D 14411 COMMERCE WAY 250 MIAMI LAKES, FL 33016 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 F

Name MUNOZ, JOSEPH D

Address 14411 COMMERCE WAY

250

City-State-Zip: MIAMI LAKES FL 33016

SIGNATURE: JOSEPH D. MUNOZ

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.

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/06/2015

Date