

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000076957

**Entity Name:** SEWAD INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

8637 S. LEXINGTON DRIVE  
MIRAMAR, FL 33025

**Current Mailing Address:**

8637 S. LEXINGTON DRIVE  
MIRAMAR, FL 33025

**FEI Number:** 26-3211581

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DAWES, LEIGHTON A  
8637 S. LEXINGTON DRIVE  
MIRAMAR, FL 33025 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 DAWES, LEIGHTON A  
Address 8637 S. LEXINGTON DRIVE  
City-State-Zip: MIRAMAR FL 33025

Title VP  
Name DAWES, ANNETTE G  
Address 8637 S. LEXINGTON DRIVE  
City-State-Zip: MIRAMAR FL 33025

Title VP  
Name DAWES, LEIGH-ANN A  
Address 8637 S LEXINGTON DRIVE  
City-State-Zip: MIRAMAR FL 33025

*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:** LEIGHTON DAWES

**PRESIDENT**

**02/18/2017**

Electronic Signature of Signing Officer/Director Detail

Date