

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000048549

Entity Name: THE WALL INSURANCE SCHOOL, INC.

Current Principal Place of Business:

2222 PONCE DE LEON BLVD #300
CORAL GABLES, FL 33134

Current Mailing Address:

1825 PONCE DE LEON BLVD #680
CORAL GABLES, FL 33134 US

FEI Number: 27-0338308

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CIOLA, CLAUDE M
136 SANTANDER AVENUE
CORAL GABLES, FL 33134 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 PD
Name CIOLA, CLAUDE M
Address 136 SANTANDER AVENUE
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name CIOLA, FRANCO
Address 136 SANTANDER AVENUE
City-State-Zip: CORAL GABLES FL 33134

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: CIOLA, CLAUDE M

PD

01/28/2020

Electronic Signature of Signing Officer/Director Detail

Date