

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000090074

**FILED**  
**Jan 11, 2015**  
**Secretary of State**  
**CC8239628252**

**Entity Name:** ALTER SURETY GROUP, INC.

**Current Principal Place of Business:**

5979 N.W. 151ST STREET  
SUITE 104  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

5979 N.W. 151ST STREET  
SUITE 104  
MIAMI LAKES, FL 33014

**FEI Number:** 27-1239026

**Certificate of Status Desired:** No

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

ALTER, WARREN M  
5979 N.W. 151ST STREET  
SUITE 104  
MIAMI LAKES, FL 33014 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 ALTER, WARREN M  
Address 5979 N.W. 151ST ST., STE. 104  
City-State-Zip: MIAMI LAKES FL 33014

Title VP  
Name ALTER, JILL E  
Address 5979 N.W. 151ST ST., STE. 104  
City-State-Zip: MIAMI LAKES FL 33014

Title S  
Name ALTER, JILL E  
Address 5979 N.W. 151ST ST., STE. 104  
City-State-Zip: MIAMI LAKES FL 33014

*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:** WARREN M. ALTER

**PRESIDENT**

**01/11/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date