2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2014
Secretary of State
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Entity Name: D MOZE INSURANCE AGENCY, INC

Current Principal Place of Business:

6295 LAKE WORTH RD
SUITE 20
LAKE WORTH, FL 33463

Current Mailing Address:

6295 LAKE WORTH RD
SUITE 20
LAKE WORTH, FL 33463 US

FEI Number: 27-4818637

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOZE, DEBRA
7149 GOLF COLONY CT
101
LAKE WORTH, FL 33467 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	Title	AGENCY OWNER
Name	MOZE, DEBRA	Name	MOZE, DEBRA
Address	6295 LAKE WORTH RD SUITE 20	Address	6295 LAKE WORTH RD SUITE 20
City-State-Zip:	LAKE WORTH FL 33463	City-State-Zip:	LAKE WORTH FL 33463

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: DEBRA MOZE PRESIDENT 04/28/2014

Electronic Signature of Signing Officer/Director Detail — Date