| 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: MARIA CASTELLANOS

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

17 PALM BAY, FL 32905

Current Principal Place of Business:

DOCUMENT# P11000032722

Current Mailing Address:

4651 BABCOCK ST SE 17 PALM BAY, FL 32905

4651 BABCOCK ST SE

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: FLORIDA INSURANCE TREASURE GROUP CORP

MARIA, CASTELLANOS 5698 CYPRESS CREEK DR GRANT, FL 32949 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 | MARIA CASTELLANOS | | | 04/03/2019 | |
|---------------------------|--|-----------------|--------------------------|------------|--|
| | Electronic Signature of Registered Agent | | | Date | |
| Officer/Director Detail : | | | | | |
| Title | Ρ | Title | SALES REP | | |
| Name | CASTELLANOS, MARIA C | Name | DAVID, CASTELLANOS | | |
| Address | 4651 BABCOCK ST SE STE 17 | Address | 4651 BABCOCK ST SE 17 | | |
| City-State-Zip: | PALM BAY FL 32905 | City-State-Zip: | | | |

Certificate of Status Desired: No

FILED Apr 03, 2019 Secretary of State 4040778360CC

Date

04/03/2019