

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000004756

**Entity Name:** AZNAREZ INSURANCE AGENCY GROUP, INC.

**Current Principal Place of Business:**

9797 SW 72 STREET  
MIAMI, FL 33173

**Current Mailing Address:**

9797 SW 72 STREET  
MIAMI, FL 33173 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

RIVERO, PEDRO RAMON  
9797 SW 72 STREET  
MIAMI, FL 33173 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:** PEDRO RIVERO

04/13/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name AZNAREZ, ATTN: ALEXANDRA  
Address 9797 SW 72 STREET  
City-State-Zip: MIAMI FL 33173

*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:** ATTN: ALEXANDRA

PRES

04/13/2021

Electronic Signature of Signing Officer/Director Detail

Date