

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000060468

Entity Name: HEMISPHERE INSURANCE GROUP, INC.

Current Principal Place of Business:

11401 SW 40 ST #340
MIAMI, FL 33165

Current Mailing Address:

11401 SW 40 ST #340
MIAMI, FL 33165

FEI Number: 90-0869737

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SUREDA, NANCY F
15060 SW 49TH LANE
UNIT B-107
MIAMI, FL 33185 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: NANCY F SUREDA

04/27/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | | | |
|-----------------|--------------------------------|-----------------|-----------------------|
| Title | P | Title | S |
| Name | SUREDA, NANCY F | Name | DURAN, CHRISTOPHER L |
| Address | 15060 SW 49TH LANE, STE. B-107 | Address | 13974 SW 46 TERR D |
| City-State-Zip: | MIAMI FL 33185 | City-State-Zip: | MIAMI FL 33175 |

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: NANCY F SUREDA

PRESIDENT

04/27/2013

Electronic Signature of Signing Officer/Director Detail

Date