### 2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P12000060468

Entity Name: HEMISPHERE INSURANCE GROUP, INC.

FILED Aug 24, 2017 Secretary of State CC5987838353

## **Current Principal Place of Business:**

12350 SW 132 CT 107 MIAMI, FL 33186

# **Current Mailing Address:**

12350 SW 132 CT #107

MIAMI, FL 33186 US

FEI Number: 90-0869737 Certificate of Status Desired: Yes

### 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 08/24/2017

Electronic Signature of Registered Agent Date

### Officer/Director Detail:

Title VP Title PRESIDENT

Name DURAN, CHRISTOPHER L Name DUARN, DOREEN

Address 12350 SW 132 CT Address 15060 SW 49 LANE

#107 B-107

City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33185

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.