

2017 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P12000060468

Entity Name: HEMISPHERE INSURANCE GROUP, INC.

FILED
Oct 18, 2017
Secretary of State
CC7636061470

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: 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

10/18/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name DURAN, CHRISTOPHER L
Address 12350 SW 132 CT
#107
City-State-Zip: MIAMI FL 33186

Title EXECUTIVE SECRETARY
Name SUREDA, NANCY
Address 15060 SW 49 LANE
B-107
City-State-Zip: MIAMI FL 33185

Title PRESIDENT
Name DURAN, DOREEN
Address 12350 SW 132 CT
#107
City-State-Zip: MIAMI FL 33186

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: DOREEN DURAN

PRESIDENT

10/18/2017

Electronic Signature of Signing Officer/Director Detail

Date