

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000049999

**Entity Name:** P.M.A. RISK SERVICES, INC.

**Current Principal Place of Business:**

7880 SW 161 STREET  
MIAMI, FL 33157

**FILED**  
**Apr 28, 2015**  
**Secretary of State**  
**CC9385582515**

**Current Mailing Address:**

7880 SW 161 STREET  
MIAMI, FL 33157 UN

**FEI Number:** 47-1077493

**Certificate of Status Desired:** No

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

MIHM, ROBERT L  
7880 SW 161 STREET  
MIAMI, FL 33157 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MIHM, ROBERT  
Address 7880 SW 161 STREET  
City-State-Zip: MIAMI FL 33157

Title VP  
Name MIHM, CANDACE G.  
Address 7880 SW 161 STREET  
City-State-Zip: PALMETTO BAY FL 33157

*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:** ROBERT L. MIHM

**PRESIDENT**

**04/28/2015**

Electronic Signature of Signing Officer/Director Detail

Date