

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000053351

Entity Name: PINTO INSURANCE AGENCY, INC

Current Principal Place of Business:

5000 SW 75 AVE., SUITE 123
MIAMI, FL 33155

Current Mailing Address:

5000 SW 75 AVE., SUITE 123
MIAMI, FL 33155 US

FEI Number: 47-1171190

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PINTO, MICHAEL
13901 SW 97 AVE.
MIAMI, FL 33176 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 D/P
Name PINTO, MICHAEL
Address 5000 SW 75 AVE., SUITE 123
City-State-Zip: MIAMI FL 33155

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: MICHAEL PINTO

PRESIDENT

01/20/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date