## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000023119

Entity Name: PARAPAR INSURANCE INC

**Current Principal Place of Business:** 

369 MINOLA DR

MIAMI SPRINGS, FL 33166

**Current Mailing Address:** 

369 MINOLA DR

MIAMI SPRINGS. FL 33166

FEI Number: 47-3383967 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TAX CARE PLUS INC 2531 NW 72 AVE

MIAMI, FL 33122 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

FILED Mar 01, 2016

**Secretary of State** 

CC8356147424

Officer/Director Detail:

Title F

Name PARAPAR, JOSEFINA M

Address 369 MINOLA DR

City-State-Zip: MIAMI SPRINGS FL 33166

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.