

**2019 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:** No

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

PARAPAR, JOSEFINA  
369 MINOLA DR  
MIAMI SPRINGS, FL 33166 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:** JOSEFINA PARAPAR

04/08/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
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.*

**SIGNATURE:** JOSEFINA M PARAPAR

PRESIDENT

04/08/2019

Electronic Signature of Signing Officer/Director Detail

Date