

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000045493

Entity Name: ALL INSURANCE, INC

Current Principal Place of Business:

90 SW 3 STREET
1605
MIAMI, FL 33130

Current Mailing Address:

90 SW 3 STREET
1605
MIAMI, FL 33130

FEI Number: 36-4811052

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AUERBACH, MARC H ESQ.
200 S BISCAYNE BLVD
SUITE 4410
MIAMI, FL 33131 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/S
Name KHARFAN, GAMIL
Address 90 SW 3 STREET
City-State-Zip: MIAMI FL 33130

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: GAMIL KHARFAN

CEO

02/23/2020

Electronic Signature of Signing Officer/Director Detail

Date