

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000046753

Entity Name: INSURE HEALTH LIFE CORP

Current Principal Place of Business:

7757 W FLAGLER STREET
SUITE 210
MIAMI, FL 33144

Current Mailing Address:

1830 NW 170TH ST
MIAMI GARDENS, FL 33056 MD

FEI Number: 47-4114341

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLIVA, FELISA M
1830 NW 170TH ST
MIAMI GARDENS, FL 33056 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	OLIVA, FELISA M
Address	1830 NW 170TH ST
City-State-Zip:	MIAMI GARDENS FL 33056

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: FELISA OLIVA

PRESIDENT

04/22/2020

Electronic Signature of Signing Officer/Director Detail

Date