

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000063401

**Entity Name:** UNLIMITED INSURANCE PARTNERS, INC

**Current Principal Place of Business:**

100 FOUNTAINEBLEAU BLVD  
APT 403  
MIAMI, FL 33172

**Current Mailing Address:**

100 FOUNTAINEBLEAU BLVD  
APT 403  
MIAMI, FL 33172

**FEI Number:** 47-4647818

**Certificate of Status Desired:** No

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

MARCHENA, HECTOR J  
100 FOUNTAINEBLEAU BLVD  
APTO 403  
MIAMI, FL 33172 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:** HECTOR MARCHENA

03/01/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name MARCHENA, HECTOR J  
Address 100 FOUNTAINEBLEAU BLVD APT 403  
City-State-Zip: MIAMI FL 33172

*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:** HECTOR J MARCHENA

PRESIDENT

03/01/2019

Electronic Signature of Signing Officer/Director Detail

Date