

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000070676

Entity Name: MBI REINSURANCE ALLOCATION SERVICES, INC.

Current Principal Place of Business:

801 BRICKELL AVENUE
SUITE 2260
MIAMI, FL 33131

Current Mailing Address:

801 BRICKELL AVENUE
SUITE 2260
MIAMI, FL 33131

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OSCAR I. ALFONSO AND ASSOCIATES, P.A.
1000 BRICKELL AVENUE
SUITE 410
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
Name JIMENEZ, JULIO
Address 801 BRICKELL AVENUE
City-State-Zip: MIAMI FL 33131

Title D,VP
Name ESQUINO, MAURICIO
Address 801 BRICKELL AVENUE
City-State-Zip: MIAMI FL 33131

Title S
Name LOZANO, DELIA
Address 801 BRICKELL AVENUE
City-State-Zip: MIAMI FL 33131

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: MAURICIO ESQUINO

D, VP

04/04/2016

Electronic Signature of Signing Officer/Director Detail

Date