

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000087290

**Entity Name:** CASA INSURANCE GROUP, INC.

**Current Principal Place of Business:**

13055 SW 42ND STREET  
SUITE 107  
MIAMI, FL 33175

**FILED**  
**Mar 10, 2022**  
**Secretary of State**  
**7435086435CC**

**Current Mailing Address:**

13055 SW 42 STREET  
SUITE 107  
MIAMI, FL 33175 US

**FEI Number: 82-3247096**

**Certificate of Status Desired: No**

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

GRAVERAN, ONIEL  
13055 SW 42 STREET  
SUITE 107  
MIAMI, FL 33175 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 SENOR, MIRIAM  
Address 13055 SW 42 STREET SUITE 107  
City-State-Zip: MIAMI FL 33175

Title T  
Name GRAVERAN, ONIEL  
Address 643 NW 129 COURT  
City-State-Zip: MIAMI FL 33182

Title S  
Name ROMERO, JACQUELINE A.  
Address 643 NW 129 COURT  
City-State-Zip: MIAMI FL 33182

*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: MIRIAM SENOR**

**PRESIDENT**

**03/10/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date