

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000087408

**Entity Name:** TERRA INSURANCE SERVICES, INC.**Current Principal Place of Business:**1111 BRICKELL AVE #2600  
MIAMI, FL 33131**Current Mailing Address:**1111 BRICKELL AVE #2600  
MIAMI, FL 33131 US**FEI Number: 82-3065561****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAY ST  
TALLAHASSEE, FL 32301 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	DIRECTOR
Name	KHOURY, JOSEPH
Address	1111 BRICKELL AVE #2600
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	FORTI, ROBERT
Address	1111 BRICKELL AVE #2600
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	SPRINGMAN, JAY
Address	1111 BRICKELL AVE #2600
City-State-Zip:	MIAMI FL 33131

Title	PRESIDENT
Name	SCHWARTZ, GREGORY
Address	3876 SHERIDIAN STREET
City-State-Zip:	HOLLYWOOD FL 33021

Title	SECRETARY
Name	OTERO, EDUARDO
Address	1111 BRICKELL AVE #2600
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: EDUARDO OTERO****SECRETARY****03/12/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date