## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000024169

**Entity Name: OPTION ONE INSURANCE INC** 

**Current Principal Place of Business:** 

4056 W HILLSOBORO BLVD DEERFIELD BCH. FL 33442

## **Current Mailing Address:**

4056 W HILLSOBORO BLVD DEERFIELD BCH. FL 33442 US

FEI Number: 83-4111404 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CSG - CAPITAL SERVICES GROUP INC 1191 E NEWPORT CENTER DR SUITE 103 DEERFIELD BCH, FL 33442 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

FILED Feb 27, 2020

**Secretary of State** 

8454782970CC

## Officer/Director Detail:

Title P Title S

NameOLIVEIRA, HEVELANO FNameOLIVEIRA, EMANUELLEAddress9715 SANDALFOOT BLVDAddress9715 SANDALFOOT BLVDCity-State-Zip:BOCA RATON FL 33428City-State-Zip:BOCA RATON FL 33428

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.

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