

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P20000058831

**Entity Name:** ARB INSURANCE MART CORP

**Current Principal Place of Business:**

12401 WEST OKEECHOBEE RD  
LOT 465  
HIALEAH, FL 33018

**Current Mailing Address:**

12401 WEST OKEECHOBEE RD  
LOT 465  
HIALEAH, FL 33018 UN

**FEI Number:** 85-2432112

**Certificate of Status Desired:** No

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

VM ACCOUNTING SERVICE INC  
1825 NW 172 TERRACE  
MIAMI GARDENS, FL 33056 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 RODRIGUEZ, ARGELIA M  
Address 12401 WEST OKEECHOBEE RD  
City-State-Zip: HIALEAH FL 33018

Title VP  
Name RODRIGUEZ, ALEX F  
Address 12401 WEST OKEECHOBEE RD  
City-State-Zip: HIALEAH FL 33018

*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:** ARGELIA M RODRIGUEZ

**PRESIDENT**

**04/30/2021**

Electronic Signature of Signing Officer/Director Detail

Date