

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000060706

Entity Name: SEVEN STAR INSURANCE SERVICES, INC**Current Principal Place of Business:**32 FLATFISH DRIVE
POINCIANA, FL 34759**Current Mailing Address:**32 FLATFISH DRIVE
POINCIANA, FL 34759**FEI Number:** 85-2280136**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JULIUS, MARTHA
1360 SW 34 AVE
FORT LAUDERDALE, FL 33312 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	PRES
Name	JULIUS, MARTHA
Address	1360 SW 34 AVE
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	TRES
Name	JULIUS, MARTHA
Address	1360 SW 34 AVE
City-State-Zip:	FORT LAUDERDALE FL 33312

Title	SEC
Name	JULIUS, NINA
Address	32 FLATFISH DRIVE
City-State-Zip:	POINCIANA FL 34759

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: MARTHA JULIUS

PRESIDENT

02/01/2021

Electronic Signature of Signing Officer/Director Detail_____
Date