# **2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000027254

Entity Name: LIFE PARTNERS INSURANCE GROUP, CORP.

FILED
Apr 05, 2016
Secretary of State
CC6019705579

# **Current Principal Place of Business:**

8333 NW 53RD STREET SUITE # 107 DORAL, FL 33166

# **Current Mailing Address:**

8333 NW 53RD STREET SUITE # 107 DORAL, FL 33166 US

FEI Number: 65-0653545 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

RODRIGUEZ, MIGUEL A 14352 SW 40TH TERRACE 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 VP Title I

Name LEYVA, RAUL V Name RODRIGUEZ, MIGUEL A
Address 13344 SW 1 TERRACE Address 14352 SW 40TH TERRACE

City-State-Zip: MIAMI FL 33184 City-State-Zip: MIAMI FL 33175

Title CS

Name DACAS, BRENDA Address 15634 NW 12TH CT

City-State-Zip: PEMBROKE PINES FL 33028

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: MIGUEL RODRIGUEZ

**PRESIDENT** 

04/05/2016