

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000074842

Entity Name: WMW INSURANCE, INC.

Current Principal Place of Business:

3379 SOUTH MILITARY TR
LAKE WORTH, FL 33463

FILED
Feb 14, 2017
Secretary of State
CC5452457571

Current Mailing Address:

ONE SE THIRD AVE
2400
MIAMI, FL 33131

FEI Number: 65-0777672

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HASNER, MARK
ONE SE THIRD AVE
2400
MIAMI, FL 33131 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 CEO
Name RUBIERA, NIRIO J
Address 420 NW 39TH AVE
City-State-Zip: GAINESVILLE FL 32609

Title COO
Name RUBIERA, WALTER A
Address 420 NW 39TH AVE
City-State-Zip: GAINESVILLE FL 32609

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: NIRIO JORGE RUBIERA

CEO

02/14/2017

Electronic Signature of Signing Officer/Director Detail

Date