

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000196552

**Entity Name:** INTERGLOBAL INSURANCE SERVICES LLC

**Current Principal Place of Business:**

172 NE 23RD TERRACE  
HOMESTEAD, FL 33033

**Current Mailing Address:**

172 NE 23RD TERRACE  
HOMESTEAD, FL 33033 US

**FEI Number:** 82-2863555

**Certificate of Status Desired:** No

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

CASTILLO, OLGA B  
172 NE 23RD TERRACE  
HOMESTEAD, FL 33033 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

**Authorized Person(s) Detail :**

|                 |                       |                 |                          |
|-----------------|-----------------------|-----------------|--------------------------|
| Title           | MGR                   | Title           | MANAGER                  |
| Name            | CASTILLO, OLGA B      | Name            | CORDOBA, DONALD FERNANDO |
| Address         | 172 NE 23RD TERRACE   | Address         | 172 NE 23RD TERRACE      |
| City-State-Zip: | HOMESTEAD FL 33033    | City-State-Zip: | HOMESTEAD FL 33033       |
|                 |                       |                 |                          |
| Title           | OFFICE MANAGER        |                 |                          |
| Name            | HOYOS, DIANA CAROLINA |                 |                          |
| Address         | 110 PINE ISLE DR      |                 |                          |
| City-State-Zip: | SANFORD FL 32773      |                 |                          |

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DONALD F CORDOBA

**PRESIDENT**

**04/28/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date