

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000001258

**Entity Name:** BROKERS INSURANCE SERVICES, LTD. CORP.

**Current Principal Place of Business:**

2 BALA PLAZA SUITE 525  
BALA CYNWYD, PA 19004

**Current Mailing Address:**

2 BALA PLAZA SUITE 525  
BALA CYNWYD, PA 19004

**FEI Number: 23-2002992**

**Certificate of Status Desired: No**

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

REATEGUI, FERNANDO  
1441 BRICKELL AVE SUITE 1400  
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 PC  
Name BLANK, MICHAEL  
Address 2 BALA PLAZA SUITE 525  
City-State-Zip: BALA CYNWYD PA 19004

Title VCS  
Name BLANK, CONNIE  
Address 2 BALA PLAZA SUITE 525  
City-State-Zip: BALA CYNWYD PA 19004

Title TD  
Name KAARBY, SUSAN  
Address 2 BALA PLAZA SUITE 525  
City-State-Zip: BALA CYNWYD PA 19004

*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: MICHAEL BLANK**

**PRESIDENT**

**01/08/2014**

Electronic Signature of Signing Officer/Director Detail

Date