2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2012
Secretary of State

DOCUMENT# K27483

Entity Name: SUAREZ & ASSOCIATES INSURANCE INC.

Current Principal Place of Business:

7400 NW SOUTH RIVER DRIVE
B1A
MEDLEY, FL 33166

New Principal Place of Business:

Current Mailing Address:

7400 NW SOUTH RIVER DRIVE
B1A
MEDLEY, FL 33166

New Mailing Address:

FEI Number: 65-0058596 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUAREZ, FRANCISCO Z
1198 W 23 ST
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRE
Name: SUAREZ, FRANCISCO Z
Address: 449 PLOVER AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VP
Name: SUAREZ, ARGELIA H
Address: 449 PLOVER AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: ST
Name: SUAREZ, MARCO A
Address: 449 PLOVER AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

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: FRANK SUAREZ PRE 04/24/2012

Electronic Signature of Signing Officer or Director Date