

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000111749

Entity Name: CUQUI INSURANCE, LLC

**FILED**  
**Apr 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3690 N STATE RD 7  
LAUDERDALE LAKES, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

1617 NW 143 WAY  
PEMBROKE PINES, FL 33028

**New Mailing Address:**

3690 N STATE RD 7  
LAUDERDALE LAKES, FL 33319

FEI Number: 83-0498383

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

URENA, OZZIE  
1617 NW 143 WAY  
PEMBROKE PINES, FL 33028 US

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

URENA, OZZIE  
3690 N STATE RD 7  
LAUDERDALE LAKES, FL 33319 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: OZZIE URENA

04/06/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: URENA, OZZIE  
Address: 3690 N STATE RD 7  
City-St-Zip: LAUDERDALE LAKES, FL 33319

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: OZZIE URENA

MGR

04/06/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date