

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000020129

FILED
Jan 05, 2012
Secretary of State

Entity Name: LUIS NECUZE INSURANCE AGENCY, INC.

Current Principal Place of Business:

8290 SW 40TH STREET, SUITE 106
MIAMI, FL 331553351 US

New Principal Place of Business:

8290 SW 40TH STREET
SUITE 106
MIAMI, FL 331553351 US

Current Mailing Address:

8290 SW 40TH STREET, SUITE 106
MIAMI, FL 331553351 US

New Mailing Address:

8290 SW 40TH STREET
SUITE 106
MIAMI, FL 331553351 US

FEI Number: 65-0984931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NECUZE, LUIS A
8290 SW 40TH STREET, SUITE 106
MIAMI, FL 331553351 US

Name and Address of New Registered Agent:

NECUZE, LUIS A
8290 SW 40TH STREET
SUITE 106
MIAMI, FL 331553351 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:

01/05/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: NECUZE, LUIS A
Address: 8290 SW 40TH STREET, SUITE 106
City-St-Zip: MIAMI, FL 33155

Title: S
Name: NECUZE, ANA M
Address: 9250 SW 118 TERRACE
City-St-Zip: MIAMI, FL 33176

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: LUIS A NECUZE

P

01/05/2012

Electronic Signature of Signing Officer or Director

Date