

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000097334

FILED
Apr 10, 2012
Secretary of State

Entity Name: FLAMINGO TITLE INSURANCE AGENCY INC.

Current Principal Place of Business:

8500 SW 8 STREET
SUITE 256
MIAMI, FL 33144

New Principal Place of Business:

8500 SW 8 STREET
SUITE 250
MIAMI, FL 33144

Current Mailing Address:

14255 S.W. 20 TERRACE
MIAMI, FL 33175

New Mailing Address:

FEI Number: 65-1048852 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TORRES, ILEANA
14255 SW 20 TERRACE
MIAMI, FL 33175 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: P
Name: ACOSTA, ILEANA T
Address: 8500 SW 8 STREET, UNIT 250
City-St-Zip: MIAMI, FL 33144

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: ILEANA TORRES

PD

04/10/2012

Electronic Signature of Signing Officer or Director

Date