## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000051066

FILED Apr 20, 2011 Secretary of State

Entity Name: CHOICE LIFE & HEALTH INSURANCE AGENCY, INC.

**New Principal Place of Business: Current Principal Place of Business:** 18459 PINES BLVD STE 351 PEMBROKE PINES, FL 33029 **New Mailing Address: Current Mailing Address:** 18459 PINES BLVD STE 351 PEMBROKE PINES, FL 33029 FEI Number: 20-0898309 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GONZALEZ, YBRAHIM 18459 PINES BLVD. STE 351 PEMBROKE PINES, FL 33029 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 **OFFICERS AND DIRECTORS:** 

Title:

 Name:
 GONZALEZ, YBRAHIM

 Address:
 18459 PINES BLVD STE 351

 City-St-Zip:
 PEMBROKE PINES, FL 33029

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: YBRAHIM GONZALEZ P 04/20/2011