

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000097512

**FILED**  
**Mar 15, 2010**  
**Secretary of State**

**Entity Name:** HEMA ALL INSURANCE BROKERS, INC.

**Current Principal Place of Business:**

12949 SW 134 TERR  
MIAMI, FL 33186

**New Principal Place of Business:**

175 FONTAINEBLEAU BLVD  
2K3  
MIAMI, FL 33172

**Current Mailing Address:**

12949 SW 134 TERR  
MIAMI, FL 33186

**New Mailing Address:**

175 FONTAINEBLEAU BLVD  
2K3  
MIAMI, FL 33172

**FEI Number:** 26-3645699

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FORTUN, HARAY  
12949 SW 134 TERR  
MIAMI, FL 33186 US

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

FORTUN, HARAY  
175 FONTAINEBLEAU BLV  
2K3  
MIAMI, FL 33172 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:** HARAY FORTUN

03/15/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** FORTUN, HARAY  
**Address:** 175 FONTAINEBLEAU BLV, STE 2K3  
**City-St-Zip:** MIAMI, FL 33172

**Title:** VD  
**Name:** SOTO, MAILYN  
**Address:** 175 FONTAINEBLEAU BLVD, STE 2K3  
**City-St-Zip:** MIAMI, FL 33172

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:** HARAY FORTUN

PD

03/15/2010

Electronic Signature of Signing Officer or Director

Date