

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000097512

FILED  
Jan 24, 2011  
Secretary of State

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

**Current Principal Place of Business:**

175 FONTAINEBLEAU BLVD  
2K3  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

175 FONTAINEBLEAU BLVD  
2K3  
MIAMI, FL 33172

**New Mailing Address:**

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

01/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date