

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000003661

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** PADRON INSURANCE, INC

**Current Principal Place of Business:**

12229 PEMBROKE ROAD  
PEMBROKE PINES, FL 33025 US

**New Principal Place of Business:**

**Current Mailing Address:**

511 W 36 PL  
HIALEAH, FL 33012 US

**New Mailing Address:**

**FEI Number:** 26-4044512

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PADRON, DIOSVANI F  
12229 PEMBROKE ROAD  
PEMBROKE PINES, FL 33025 US

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

PADRON, DIOSVANI F  
3400 SW 141 AVE  
MIRAMAR, FL 33027 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: ALEXIS PADRON

01/04/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PADRON, DIOSVANI F  
Address: 3400 SW 141 AVE  
City-St-Zip: MIRAMAR, FL 33027 US

Title: VP  
Name: PADRON, ALEXIS  
Address: 511 W 36 PL  
City-St-Zip: HIALEAH, FL 33012 US

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: ALEXIS PADRON

VP

01/04/2012

Electronic Signature of Signing Officer or Director

Date