

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000081923

FILED
May 01, 2011
Secretary of State

Entity Name: EVOLUTIONS INSURANCE SERVICES INC

Current Principal Place of Business:

18573 SW 49TH ST
MIRAMAR, FL 33029

New Principal Place of Business:

Current Mailing Address:

18573 SW 49TH ST
MIRAMAR, FL 33029

New Mailing Address:

FEI Number: 80-0488692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VERNERET, SHELLY
18573 SW 49TH ST
MIRAMAR, FL 33029 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: VERNERET, SHELLY
Address: 18573 SW 49TH ST
City-St-Zip: MIRAMAR, FL 33029

Title: VP
Name: VERNERET, KIM
Address: 18573 SW 49TH ST
City-St-Zip: MIRAMAR, FL 33029

Title: VP
Name: VERNERET, TAMMI
Address: 18573 SW 49TH ST
City-St-Zip: MIRAMAR, 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: SHELLY VERNERET

P

05/01/2011

Electronic Signature of Signing Officer or Director

Date