

P1 00000018099

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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e, Erin

From: Marcelin Paul [statewideis@gmail.com]
Sent: Wednesday, November 03, 2010 3:19 PM
To: CorpAddressChange
Subject: Document Number P10000018099

Dear sir or Madam,

Ref# P10000018099

Please add my Employer Identification Number: **27-2106157** to Statewide Insurance And Financial Services Inc. and also,
please change our address to: 2463 NW 40th Ave Lauderhill, FL 33313

Thank you!

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Marcelin Paul
Statewide Insurance
& Financial Services, Inc.
2463 N. State Rd 7
Lauderhill, FL 33313
Office: 954-990-5468
Direct: 954-667-9793
Fax: 954-990-5470
Email: statewideis@gmail.com
www.statewidesite.com