

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000036053

FILED
Feb 20, 2012
Secretary of State

Entity Name: HEALTH FAMILY INSURANCE, INC.

Current Principal Place of Business:

15280 NW 79 CT
SUITE 103
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

15280 NW 79 CT
SUITE 103
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 65-0662907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINOSA, FERNANDO JR.
10336 NW 31 TERR
DORAL, FL 33172 US

Name and Address of New Registered Agent:

ESPINOSA, FERNANDO JR.
16222 NW 79 AVE
MIAMI LAKES, FL 33016 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: FERNANDO ESPINOSA

02/20/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: ESPINOSA, FERNANDO
Address: 16222 NW 79 AVE
City-St-Zip: MIAMI LAKES, FL 33016

Title: PS
Name: ESPINOSA, FERNANDO JR.
Address: 16222 NW 79 AVE
City-St-Zip: MIAMI LAKES, FL 33016

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: FERNANDO ESPINOSA

PS

02/20/2012

Electronic Signature of Signing Officer or Director

Date