

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S08819

FILED
Apr 11, 2011
Secretary of State

Entity Name: CHAPLAN AND CASTRO INSURANCE AGENCY, INC.

Current Principal Place of Business:

2552 NW 7 ST
MIAMI, FL 33125 US

New Principal Place of Business:

Current Mailing Address:

2552 NW 7 ST
MIAMI, FL 33125 US

New Mailing Address:

FEI Number: 65-0225139 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTRO, MANUEL F
9961 SW 66 ST
MIAMI, FL 33173 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: CASTRO, DOLORES
Address: 233 ROMANO AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: STD
Name: CASTRO, DOLORES
Address: 9961 SW 66TH ST
City-St-Zip: MIAMI, FL 33173

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: DOLORES CASTRO

PRES

04/11/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date