

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 230980

Entity Name: OSSIP-HARRIS INSURANCE INC**Current Principal Place of Business:**11 ISLAND AVE
1502
MIAMI BEACH, FL 33139**Current Mailing Address:**11 ISLAND AVE
1502
MIAMI BEACH, FL 33139 US**FEI Number:** 59-0914554**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARRIS, GAIL
11 ISLAND AVE
1502
MIAMI BEACH, FL 33139 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:** GAIL HARRIS

02/28/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	HARRIS, GAIL L.
Address	11 ISLAND AVE 1502
City-State-Zip:	MIAMI BEACH FL 33139

Title	VP
Name	HARRIS, JON DAVID
Address	1621 MICANOPY
City-State-Zip:	MIAMI FL 33133

Title	SECRETARY, VP
Name	HARRIS, BRETT A
Address	805 NORTH SHORE DR
City-State-Zip:	MIAMI BEACH FL 33141

Title	TREASURER
Name	HARRIS, GEOFFREY
Address	1621 MICANOPY
City-State-Zip:	MIAMI FL 33133

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: HARRIS, GAIL L.

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02/28/2023

Electronic Signature of Signing Officer/Director Detail

Date