

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 550448

Entity Name: AABA LOPEZ INSURANCE AGENCY, INC.

Current Principal Place of Business:

5370 PALM AVENUE
SUITE 1
HIALEAH, FL 33012

Current Mailing Address:

5370 PALM AVENUE
SUITE 1
HIALEAH, FL 33012

FEI Number: 59-1781274

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, JOSEPH
5370 PALM AVENUE #1
HIALEAH, FL 33012 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PS
Name LOPEZ, JOSEPH
Address 5370 PALM AVENUE #1
City-State-Zip: HIALEAH FL 33012

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: JOSEPH LOPEZ

PRESIDENT

01/13/2015

Electronic Signature of Signing Officer/Director Detail

Date