## **2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 615795** 

Entity Name: ITALIANO INSURANCE SERVICES, INC.

**Current Principal Place of Business:** 

3021 SWANN AVE TAMPA, FL 33609

**Current Mailing Address:** 

P.O. BOX 18425

TAMPA. FL 33679-8425 US

FEI Number: 59-1892236 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ITALIANO, JEFFREY G 3021 SWANN AVENUE TAMPA, FL 33609 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

FILED Jan 12, 2023

**Secretary of State** 

8401812823CC

Officer/Director Detail:

Title DV Title DPST

Name ITALIANO, NELSON A II Name ITALIANO, JEFFREY G

Address 150 PALM AVE Address P.O. BOX 18425

City-State-Zip: BOCA GRANDE FL 33921 City-State-Zip: TAMPA FL 33679

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: JEFFREY ITALIANO

**PRESIDENT** 

01/12/2023