

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M05305

**FILED  
Apr 30, 2019  
Secretary of State  
0552286352CC**

**Entity Name:** GLOBAL INSURANCE AGENCY INC.

**Current Principal Place of Business:**

1575 SW 87TH AVE  
SUITE B  
MIAMI, FL 33174

**Current Mailing Address:**

1575 SW 87TH AVE  
SUITE B  
MIAMI, FL 33174 US

**FEI Number: 59-2447642**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MENENDEZ, RICHARD  
1575 SW 87TH AVE  
SUITE B  
MIAMI, FL 33174 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: RICHARD MENENDEZ**

**04/30/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CURIEL, BRENDA  
Address        1575 SW 87TH AVE  
                 SUITE B  
City-State-Zip: MIAMI FL 33174

Title            VP, ASST. SECRETARY  
Name            BAYONA, MONICA P  
Address        1575 SW 87TH AVE  
                 SUITE B  
City-State-Zip: MIAMI FL 33174

Title            VP, TREASURER  
Name            MORALES, GABRIEL G  
Address        1575 SW 87TH AVE  
                 SUITE B  
City-State-Zip: MIAMI FL 33174

Title            VP, SECRETARY  
Name            GARCIA, ALINA  
Address        1575 SW 87TH AVE  
                 SUITE B  
City-State-Zip: MIAMI FL 33174

Title            VP, ASST. TREASURER  
Name            VALDES, JOVANNY  
Address        1575 SW 87TH AVE  
                 SUITE B  
City-State-Zip: MIAMI FL 33174

Title            OFFICER  
Name            RODRIGUEZ, MYRNA  
Address        1575 SW 87TH AVE  
                 SUITE B  
City-State-Zip: MIAMI FL 33174

*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: BRENDA CURIEL**

**PRES**

**04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date