

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000073266

**Entity Name:** JUSTO AUTO INSURANCE SERVICES CORP.

**Current Principal Place of Business:**

28931 SOUTH DIXIE HWY  
HOMESTEAD, FL 33030

**Current Mailing Address:**

28931 SOUTH DIXIE HWY  
HOMESTEAD, FL 33030

**FEI Number:** 65-1028433

**Certificate of Status Desired:** No

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

MARTINEZ, EVELYN P  
28931 SOUTH DIXIE HWY  
HOMESTEAD, FL 33030 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            PTD  
Name            MARTINEZ, EVELYN P  
Address        28931 SOUTH DIXIE HWY  
City-State-Zip: HOMESTEAD FL 33030

Title            S  
Name            MARTINEZ, EVELYN  
Address        28931 SOUTH DIXIE HWY  
City-State-Zip: HOMESTEAD FL 33030

*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:** EVELYN MARTINEZ

**PRESIDENT**

**04/28/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date