

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000086890

Entity Name: PENINSULA INSURANCE SERVICE, INC.

Current Principal Place of Business:

10691 NORTH KENDALL DR. SUITE 212
MIAMI, FL 33176

Current Mailing Address:

10691 NORTH KENDALL DR. SUITE 212
MIAMI, FL 33176

FEI Number: 65-1132840

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESTRADA, CECILIA
10691 N KENDALL DR STE 212
MIAMI, FL 33176 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 P
Name ESTRADA, CECILIA
Address 10691 N KENDALL DR STE 212
City-State-Zip: MIAMI FL 33176

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: CECILIA ESTRADA

PRESIDENT

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date