

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000112586

Entity Name: LAZARO MASEDA INSURANCE AGENCY, INC.

Current Principal Place of Business:

7800 W. OAKLAND PARK BLVD.
SUITE 218
SUNRISE, FL 33351

Current Mailing Address:

7800 W. OAKLAND PARK BLVD.
SUITE 218
SUNRISE, FL 33351 US

FEI Number: 55-0802479

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MASEDA, LAZARO A
7800 W. OAKLAND PARK BLVD.
SUITE 218
SUNRISE, FL 33351 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 MASEDA, LAZARO AMR
Address 1988 NW 110TH LANE
City-State-Zip: CORAL SPRINGS FL 33071

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: LAZARO A MASEDA

PRESIDENT

02/11/2019

Electronic Signature of Signing Officer/Director Detail

Date