

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000029140

**Entity Name:** ARISTA INSURANCE ADVISORS II, INC.

**Current Principal Place of Business:**

5902-B SOUTH DIXIE HIGHWAY  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

5902-B SOUTH DIXIE HIGHWAY  
WEST PALM BEACH, FL 33405

**FEI Number: 65-0665258**

**Certificate of Status Desired: No**

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

JAMES, KEITH AESQ.  
250 AUSTRALIAN AVENUE SOUTH  
SUITE 500  
WEST PALM BEACH, FL 33401 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 D  
Name MORAN, CARLOS MPRES  
Address 5902-B SOUTH DIXIE HIGHWAY  
City-State-Zip: WEST PALM BEACH FL 33405

*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: CARLOS MORAN**

**PRESIDENT**

**03/06/2017**

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

\_\_\_\_\_  
Date