## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000007397

Entity Name: BC INSURANCE SERVICES, INC.

**Current Principal Place of Business:** 

12555 ORANGE DRIVE SUITE 101 DAVIE, FL 33330

## **Current Mailing Address:**

PO BOX 550819

FT. LAUDERDALE, FL 33355 US

FEI Number: 32-0103875 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KANTOR, BRAD PRES 12555 ORANGE DRIVE SUITE 101 DAVIE, FL 33330 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

**FILED** Feb 01, 2017

**Secretary of State** 

CC4324472357

## Officer/Director Detail:

Title

KANTOR, BRAD PRES Name 12555 ORANGE DRIVE Address

SIGNATURE: BRAD KANTOR

City-State-Zip: DAVIE FL 33330

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.

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

02/01/2017 Date