

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141597

Entity Name: ALL INSURANCE SERVICES CORP.

Current Principal Place of Business:

1548 W. 37 ST
HIALEAH, FL 33012

Current Mailing Address:

1548 W. 37 ST
HIALEAH, FL 33012

FEI Number: 03-0549610

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERNANDEZ, INES J
1548 W 37 ST
HIALEAH, FL 33012 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 FERNANDEZ, INES J
Address 1548 W 37 ST
City-State-Zip: HIALEAH FL 33012

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: INES J FERNANDEZ

PD

04/05/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date