

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000039781

Entity Name: LINCOLN INSURANCE AGENCY INC.

Current Principal Place of Business:

1657 WEST AVENUE
MIAMI BEACH, FL 33139

Current Mailing Address:

1657 WEST AVENUE
MIAMI BEACH, FL 33139 US

FEI Number: 20-2527602

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ACOSTA, JESUS
20040 N.W 86 CT
MIAMI, FL 33015 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	Title	V
Name	ACOSTA, JESUS	Name	ACOSTA, DANIA M
Address	20040 N.W 86 CT	Address	20040 NW 86TH CT
City-State-Zip:	MIAMI FL 33015	City-State-Zip:	HIALEAH FL 33015

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: JESUS ACOSTA

PRESIDENT

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date