

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000148642

Entity Name: GROUP DE SOTO INSURANCE, INC.

Current Principal Place of Business:

6900 TAVISTOCK BLVD STE. 400
LAKE NONA, FL 32827

Current Mailing Address:

6900 TAVISTOCK BLVD STE.400
LAKE NONA, FL 32827 US

FEI Number: 20-3751535

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOTO, SANTOS CPA
6900 TAVISTOCK BLVD STE.400
LAKE NONA, FL 32827 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: SANTOS SOTO

01/16/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPS
Name SOTO, SANTOS CPA
Address 6900 TAVISTOCK BLVD STE. 400
City-State-Zip: LAKE NONA FL 32827

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: SANTOS SOTO

PRESIDENT

01/16/2024

Electronic Signature of Signing Officer/Director Detail

Date