

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000112880

**Entity Name:** FLORIDIAN INSURANCE AGENCY INC

**Current Principal Place of Business:**

NADER ZAYER  
7316 E. COLONIAL DR  
ORLANDO, FL 32807

**FILED**  
**Jan 09, 2015**  
**Secretary of State**  
**CC9126605928**

**Current Mailing Address:**

NADER ZAYER  
7316 E. COLONIAL DR  
ORLANDO, FL 32807 US

**FEI Number: 26-1244569**

**Certificate of Status Desired: No**

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

ZAYER, NADER M  
14798 FELLOWS LANE  
ORLANDO, 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            P  
Name            ZAYER, NADER M  
Address        14798 FELLOWS LANE  
City-State-Zip: ORLANDO 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: NADER ZAYER** \_\_\_\_\_

**PRESIDENT**

**01/09/2015**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date