

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000086895

Entity Name: BLUE OCEAN INSURANCE AGENCY CORP.

Current Principal Place of Business:

654 WOODGATE CIRCLE
WESTON, FL 33326

Current Mailing Address:

654 WOODGATE CIRCLE
WESTON, FL 33326 US

FEI Number: 26-3396868

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JUAN CARLOS ECHEVERRI
654 WOODGATE CIRCLE
WESTON, FL 33326 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 ECHEVERRI, JUAN C
Address 654 WOODGATE CIRCLE
City-State-Zip: WESTON FL 33326

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: JUAN ECHEVERRI

PRESIDENT

03/23/2015

Electronic Signature of Signing Officer/Director Detail

Date