

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000098291

**Entity Name:** FLORIDIAN DISCOUNT INSURANCE AGENCY, INC.

**Current Principal Place of Business:**

3500 GATEWAY DR STE 103  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

3500 GATEWAY DR STE 103  
POMPANO BEACH, FL 33069 US

**FEI Number:** 26-3648939

**Certificate of Status Desired:** No

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

DEL REY, OSCAR  
3500 GATEWAY DR STE 103  
POMPANO BEACH, FL 33069 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, D  
Name DEL REY, OSCAR  
Address 3500 GATEWAY DR  
STE 103  
City-State-Zip: POMPANO BEACH FL 33069

Title VP, D  
Name DEL REY, DARCY  
Address 3500 GATEWAY DR  
STE 103  
City-State-Zip: POMPANO BEACH FL 33069

*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:** OSCAR DEL REY

**PRESIDENT**

**04/30/2024**

Electronic Signature of Signing Officer/Director Detail

Date