

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000057658

Entity Name: D'ANDRE INSURANCE GROUP, INC.

Current Principal Place of Business:

3540 LOQUAT AVENUE
MIAMI, FL 33133

Current Mailing Address:

3540 LOQUAT AVENUE
MIAMI, FL 33133

FEI Number: 27-3060868

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHENKMAN, PHILIP
12901 SW 132 AVENUE
MIAMI, FL 33186 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 D'ANDRE, CARLA
Address 3540 LOQUAT AVENUE
City-State-Zip: MIAMI FL 33133

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: CARLA D'ANDRE

PRESIDENT

02/03/2014

Electronic Signature of Signing Officer/Director Detail

Date