2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2016
Secretary of State
CC7406826042

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Entity Name: INSURANCE PREFERRED PROVIDERS, INC.

Current Principal Place of Business:

17515 PINES BOULEVARD
PEMBROKE PINES, FL 33029

Current Mailing Address:

17515 PINES BOULEVARD
PEMBROKE PINES, FL 33029 US

FEI Number: 37-1659547

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VALDIVIESO, GLORIA N
17515 PINES BOULEVARD
PEMBROKE PINES, FL 33029 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	Title	S
Name	VALDIVIESO, GLORIA N	Name	VALDIVIESO, TOMAS
Address	17515 PINES BOULEVARD	Address	17515 PINES BOULEVARD
City-State-Zip:	PEMBROKE PINES FL 33029	City-State-Zip:	PEMBROKE PINES FL 33029

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: GLORIA VALDIVIESO PRESIDENT 03/10/2016

Electronic Signature of Signing Officer/Director Detail — Date