

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000091599

Entity Name: FAMILY LIFE AND HEALTH INSURANCE, INC

Current Principal Place of Business:

7531 W 29 LANE
HIALEAH, FL 33018

Current Mailing Address:

7531 W 29 LANE
HIALEAH, FL 33018

FEI Number: 47-2320939

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERRERA, LUIS F
7531 W 29 LANE
HIALEAH, FL 33018 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 FERRERA, LUIS F
Address 7531 W 29 LANE
City-State-Zip: HIALEAH FL 33018

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: LUIS FERRERA

PRESIDENT

02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date