

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000073959

Entity Name: PROFESSIONAL INSURANCE SERVICES OF FLORIDA, INC.

Current Principal Place of Business:

5757 BLUE LAGOON DRIVE
SUITE 140B
MIAMI, FL 33126

Current Mailing Address:

5757 BLUE LAGOON DRIVE
SUITE 140B
MIAMI, FL 33126 US

FEI Number: 47-5026292

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SARDINAS, ALEXANDER
5757 BLUE LAGOON DRIVE
SUITE 140-B
MIAMI, FL 33126 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: ALEXANDER SARDINAS

01/19/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PSTD
Name SARDINAS, ALEXANDER
Address 5757 BLUE LAGOON DRIVE
SUITE 140B
City-State-Zip: MIAMI FL 33126

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: ALEXANDER SARDINAS

PRESIDENT

01/19/2022

Electronic Signature of Signing Officer/Director Detail

Date