

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000048471

Entity Name: ANGELL'S INSURANCE SPECIALIST INC

Current Principal Place of Business:

87 NE 44TH STREET
STE 6
OAKLAND PARK, FL 33334

Current Mailing Address:

87 NE 44TH STREET
STE 6
OAKLAND PARK, FL 33334 US

FEI Number: 81-2804886

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANGELL, RAYON D
1100 NW 18 COURT
FORT LAUDERDALE, FL 33311 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 ANGELL, RAYON D
Address 1100 NW 18TH COURT
City-State-Zip: FORT LAUDERDALE FL 33311

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: RAYON ANGELL

PRESIDENT

04/08/2020

Electronic Signature of Signing Officer/Director Detail

Date