

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000061399

Entity Name: JULES INSURANCE AGENCY INC.

Current Principal Place of Business:

8205 SW 12TH ST
NORTH LAUDERDALE, FL 33068

Current Mailing Address:

8205 SW 12TH ST
NORTH LAUDERDALE, FL 33068 US

FEI Number: 81-3246028

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JULES, EVENS
8205 SW 12TH ST
NORTH LAUDERDALE, FL 33068 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 CEO
Name JULES, EVENS
Address 8205 SW 12TH ST
City-State-Zip: NORTH LAUDERDALE FL 33068

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: EVENS JULES

CEO

04/25/2018

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date