

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000093894

Entity Name: ESMERALDA INSURANCE CORP

Current Principal Place of Business:

80 SW 8TH ST
2000
MIAMI, FL 33130

Current Mailing Address:

80 SW 8TH ST
2000
MIAMI, FL 33130 US

FEI Number: 81-4539224

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRISTIA, SADIR H
1050 NW 44 AVE
100
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PTS
Name CRISTIA, SADIR H
Address 1050 NW 44 AVE
 100
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: SADIR CRISTIA

PTS

02/04/2019

Electronic Signature of Signing Officer/Director Detail

Date