

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000039547

Entity Name: LILY REXACH INSURANCE AGENCY, INC

Current Principal Place of Business:

6611 FOREST HILL BLVD
GREENACRES, FL 33413

Current Mailing Address:

6611 FOREST HILL BLVD
GREENACRES, FL 33413 US

FEI Number: 82-5344041

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REXACH, LIDALMYS V
6611 FOREST HILL BLVD
GREENACRES, FL 33413 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 REXACH, LIDALMYS V
Address 6611 FOREST HILL BLVD
City-State-Zip: GREENACRES FL 33413

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: LIDALMYS V REXACH

PRESIDENT

02/08/2021

Electronic Signature of Signing Officer/Director Detail

Date