2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2025
Secretary of State
0983895952CC

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Entity Name: SHALOM INSURANCE CORP

Current Principal Place of Business:

1001 E BAKER ST STE 403
PLANT CITY, FL 33563

Current Mailing Address:

1001 E BAKER ST STE 403
PLANT CITY, FL 33563

FEI Number: 93-3624120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAENZ, RONALD
1001 E BAKER ST STE 403
PLANT CITY, FL 33563 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	Title	VP
Name	RUIZ-BARDALES, JENNIFER C	Name	SAENZ, RONALD
Address	1001 E BAKER ST STE 403	Address	1001 E BAKER ST STE403
City-State-Zip:	PLANT CITY FL 33563	City-State-Zip:	PLANT CITY FL 33563

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: RONALD SAENZ VICE PRESIDENT 04/03/2025

Electronic Signature of Signing Officer/Director Detail — Date