## **2024 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P23000084373

Entity Name: SAGARRA CO INSURANCE, INC

**Current Principal Place of Business:** 

1555 W 37TH ST APT 218

HIALEAH, FL 33012

## **Current Mailing Address:**

1555 W 37TH ST APT 218 HIALEAH, FL 33012

FEI Number: 93-4737064 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ESCOBAR SAGARRA, ANTHONY 1555 W 37TH ST APT 218 HIALEAH, FL 33012 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: ANTHONY ESCOBAR SAGARRA 11/27/2024

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title VP

Name COMPANIONI, YAMELIS

Address 1555 W 37 STREE

APART 218

City-State-Zip: HIALEAH FL 33012

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: ANTHONY ESCOBAR SAGARRA

11/27/2024

FILED Nov 27, 2024

**Secretary of State** 

5201609742CR

Date