

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000092616

Entity Name: ALEJANDRO LOPEZ INSURANCE AGENCY INC.

Current Principal Place of Business:

17140 ROYAL PALM BLVD
SUITE 3
WESTON, FL 33326

Current Mailing Address:

17140 ROYAL PALM BLVD
SUITE 3
WESTON, FL 33326 US

FEI Number: 65-0551246

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, ALEJANDRO
412 COCONUT CIRCLE
WESTON, FL 33326 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 D
Name LOPEZ, ALEJANDRO
Address 17140 ROYAL PALM BLVD STE 3
City-State-Zip: WESTON FL 33326

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: ALEJANDRO LOPEZ

PRES

08/04/2016

Electronic Signature of Signing Officer/Director Detail

Date