

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000080273

**Entity Name:** DANIEL STEWART'S INSURANCE MANAGEMENT, INC.

**Current Principal Place of Business:**

1121 S.MILITARY TRAIL  
126  
DEERFIELD BEACH, FL 33442

**Current Mailing Address:**

1121 S.MILITARY TRAIL  
126  
DEERFIELD BEACH, FL 33442

**FEI Number:** 65-0781802

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STEWART, DANIEL C  
1121 S.MILITARY TRAIL  
126  
DEERFIELD BEACH, FL 33442 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 PD  
Name PEARLMAN, ROBERT  
Address 3132 N. FEDERAL HIGHWAY  
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title STD  
Name STEWART, DANIEL C  
Address 1121 S.MILITARY TRAIL #126  
City-State-Zip: DEERFIELD BEACH FL 33442

*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:** DANIEL STEWART

**SECRETARY**

**02/06/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date