

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000009980

**Entity Name:** NATIONAL POINT AND INSURANCE REDUCTION COURSE,  
INC.

**FILED**  
**Feb 10, 2017**  
**Secretary of State**  
**CC3620232447**

**Current Principal Place of Business:**

6330 VARIEL AVENUE  
STE. #100  
WOODLAND HILLS, CA 91367

**Current Mailing Address:**

17328 VENTURA BLVD.  
SUITE #202  
ENCINO, CA 91316

**FEI Number: 65-0809288**

**Certificate of Status Desired: No**

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

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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            CEO  
Name            ALEKSINTSER, GARY  
Address        17328 VENTURA BLVD. #202  
City-State-Zip: ENCINO CA 91316

*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: GARY ALEKSINTSER**

**CEO**

**02/10/2017**

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

\_\_\_\_\_  
Date