

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006294

Entity Name: NACORA INSURANCE BROKERS INC.**Current Principal Place of Business:**10 EXCHANGE PLACE
JERSEY CITY, NJ 07302**Current Mailing Address:**10 EXCHANGE PLACE
JERSEY CITY, NJ 07302 US**FEI Number:** 13-2996486**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	TREASURER
Name	OSTERBERG, DAN
Address	10 EXCHANGE PLACE
City-State-Zip:	JERSEY CITY NJ 07302

Title	VP, DIRECTOR
Name	FIOHAVANTI-ASHIKWE, DIANA
Address	10 EXCHANGE PLACE
City-State-Zip:	JERSEY CITY NJ 07302

Title	SECRETARY
Name	JONES, NADINE
Address	10 EXCHANGE PLACE
City-State-Zip:	JERSEY CITY NJ 07302

Title	PRESIDENT
Name	MIHOK, RADOSLAV
Address	10 EXCHANGE PLACE
City-State-Zip:	JERSEY CITY NJ 07302

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: NADINE JONES**SECRETARY****08/03/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date