

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000004631

Entity Name: BLUEFIRE INSURANCE SERVICES, INC.**Current Principal Place of Business:**7711 CENTER AVENUE
SUITE 200
HUNTINGTON BEACH, CA 92647**Current Mailing Address:**7711 CENTER AVENUE
SUITE 200
HUNTINGTON BEACH, CA 92647 US**FEI Number:** 81-4412943**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	DIRECTOR, EXECUTIVE VICE PRESIDENT, CHIEF FINANCIAL OFFICER
Name	KAPLAN, MICHAEL
Address	7711 CENTER AVENUE SUITE 200
City-State-Zip:	HUNTINGTON BEACH CA 92647

Title	DIRECTOR, CHAIRMAN, CHIEF EXECUTIVE OFFICER
Name	SORIANO, CESAR
Address	7711 CENTER AVENUE SUITE 200
City-State-Zip:	HUNTINGTON BEACH CA 92647

Title	EXECUTIVE VICE PRESIDENT, SECRETARY
Name	NEWMAN, CAROL R.
Address	7711 CENTER AVENUE SUITE 200
City-State-Zip:	HUNTINGTON BEACH CA 92647

Title	DIRECTOR, PRESIDENT
Name	SHROUT, ANDREW
Address	7711 CENTER AVENUE SUITE 200
City-State-Zip:	HUNTINGTON BEACH CA 92647

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: CAROL R. NEWMAN**SECRETARY****04/03/2021**

Electronic Signature of Signing Officer/Director Detail

Date