# 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005114

Entity Name: INSURANCEZEBRA, INC.

# **Current Principal Place of Business:**

301 CHICON STREET SUITE A AUSTIN, TX 78702

# **Current Mailing Address:**

301 CHICON STREET SUITE A AUSTIN, TX 78702 US

# FEI Number: 45-4235904

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

## **Officer/Director Detail :**

TitlePRESIDENT / CEO / SECRETARY /<br/>TREASURER / CFO / DIRECTORNameLYONS, ADAMAddress301 CHICON STREET<br/>SUITE ACity-State-Zip:AUSTIN TX 78702

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.

PRESIDENT

SIGNATURE: ADAM LYONS

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

04/04/2016 Date