2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005114

Entity Name: INSURANCEZEBRA, INC.

Current Principal Place of Business:

98 SAN JACINTO BLVD
STE 2000
AUSTIN, TX 78701

Current Mailing Address:

98 SAN JACINTO BLVD
STE 2000
AUSTIN, TX 78701 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

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:

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Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	COO	Title	CEO
Name	DZIABIAK, JOSHUA	Name	MELNICK, KEITH
Address	98 SAN JACINTO BLVD STE 2000	Address	98 SAN JACINTO BLVD STE 2000
City-State-Zip:	AUSTIN TX 78701	City-State-Zip:	AUSTIN TX 78701
Title	TREASURER / CFO	Title	SECRETARY
Name	LYONS, ADAM	Name	LYONS, ADAM
Address	98 SAN JACINTO BLVD STE 2000	Address	98 SAN JACINTO BLVD STE 2000
City-State-Zip:	AUSTIN TX 78701	City-State-Zip:	AUSTIN TX 78701
Title	CHAIRMAN OF THE BOARD	Title	DIRECTOR
Name	LYONS, ADAM	Name	LYONS, ADAM
Address	98 SAN JACINTO BLVD STE 2000	Address	98 SAN JACINTO BLVD STE 2000
City-State-Zip:	AUSTIN TX 78701	City-State-Zip:	AUSTIN TX 78701
Title	PRESIDENT		
Name	LYONS, ADAM		
Address	98 SAN JACINTO BLVD STE 2000		
City-State-Zip:	AUSTIN TX 78701		

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: ADAM LYONS   PRESIDENT   04/22/2021

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Electronic Signature of Signing Officer/Director Detail   Date