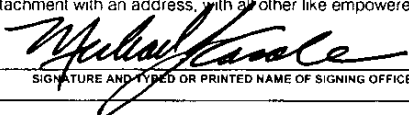


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90121 048 ***150.00

DOCUMENT # F06000002153					
1. Entity Name CARDIF PROPERTY AND CASUALTY INSURANCE COMPANY					
Principal Place of Business 14000 SW 119TH AVENUE SUITE 207 MIAMI, FL 33186			Mailing Address 14000 SW 119TH AVENUE, SUITE 207 MIAMI, FL 33186		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address Post Office Box 770250			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Miami, Florida		4. FEI Number 75-6015738	
Zip		Country		Applied For Not Applicable	
Zip 33177-0250		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CASALE, MICHAEL J 14000 SW 119TH AVE STE 207 MIAMI, FL 33186			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO MILLOR, MANUEL J 14000 SW 119TH AVE STE 207 MIAMI, FL 33186	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC10 D Christopher Alfaras 14000 SW 119th Ave Suite 207 Miami, FL 33186
		☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCO CASALE, MICHAEL J 14000 SW 119TH AVE STE 207 MIAMI, FL 33186	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS STARRETT, CYNTHIA J 14000 SW 119TH AVE STE 207 MIAMI, FL 33186	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP FURLOW, KENNETH W 14000 SW 119TH AVE STE 207 MIAMI, FL 33186	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT GINSBERG, MICHAEL D 14000 SW 119TH AVE STE 207 MIAMI, FL 33186	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MANNING, VINCE J 14000 SW 119TH AVE STE 207 MIAMI, FL 33186	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			4-22-08 305-234-1771		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		