

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000489

FILED
Jan 03, 2012
Secretary of State

Entity Name: HBW INSURANCE & FINANCIAL SERVICES, INC.

Current Principal Place of Business:

3355 COCHRAN ST STE 100
SIMI VALLEY, CA 93063

New Principal Place of Business:

Current Mailing Address:

3355 COCHRAN ST STE 100
SIMI VALLEY, CA 93063

New Mailing Address:

FEI Number: 77-0383757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUGUSTIN, JACQUES
4460 N STATE RD 7 #210
NORTH LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP
Name: HELLENBRAND, BARNEY
Address: 3355 COCHRAN ST STE 100
City-St-Zip: SIMI VALLEY, CA 93063

Title: DV
Name: WARD, DANIEL
Address: 3355 COCHRAN ST STE 100
City-St-Zip: SIMI VALLEY, CA 93063

Title: S
Name: HELLENBRAND, BONNIE
Address: 3355 COCHRAN ST STE 100
City-St-Zip: SIMI VALLEY, CA 93063

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: BARNEY HELLENBRAND

PRES

01/03/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date