

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000009983

FILED
Jan 05, 2011
Secretary of State

Entity Name: DISCOUNT INSURANCE NETWORK, INC.

Current Principal Place of Business:

801 NE 125 STREET
NORTH MIAMI, FL 33161 US

New Principal Place of Business:

Current Mailing Address:

801 NE 125 STREET
NORTH MIAMI, FL 33161 US

New Mailing Address:

FEI Number: 65-0985041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVERA, HERNAN D VP
801 NE 125 ST
NORTH MIAMI, FL 33161 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: PD
Name: OLIVERA, LILIANA B
Address: 801 NE 125TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: VP
Name: OLIVERA, HERNAN D
Address: 2321 NE 193 ST
City-St-Zip: MIAMI, FL 33180 US

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: HERNAN D OLIVERA

VP

01/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date