

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000015239

**FILED**  
**Apr 27, 2006**  
**Secretary of State**

**Entity Name:** XCEL RISK SERVICES, INC.

**Current Principal Place of Business:**

1400 E. OAKLAND PARK BLVD.  
SUITE 207  
OAKLAND PARK, FL 33334

**New Principal Place of Business:**

2125 N.E 54 STREET  
FT. LAUDERDALE, FL 33308

**Current Mailing Address:**

1400 E. OAKLAND PARK BLVD.  
SUITE 207  
OAKLAND PARK, FL 33334

**New Mailing Address:**

P. O. BOX 70366  
FT. LAUDERDALE, FL 33307

**FEI Number:** 02-0543522

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHELDON, HARVEY  
3250 N. 29 AVE.  
HOLLYWOOD, FL 33020 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SHELDON, HARVEY  
Address: 3250 N. 29 AVE.  
City-St-Zip: HOLLYWOOD, FL 33020

Title: PRES ( ) Delete  
Name: GIAMBRONE, GREGORY P  
Address: 1400 E. OAKLAND PARK BLVD. #207  
City-St-Zip: OAKLAND PARK, FL 33334 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PRES (X) Change ( ) Addition  
Name: GIAMBRONE, GREGORY P  
Address: 2125 N.E. 54 STREET  
City-St-Zip: FT.LAUDERDALE, FL 33308 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: GREGORY P. GIAMBRONE

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date