

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000052934

FILED
Aug 10, 2004
Secretary of State

Entity Name: NICK INSURANCE & FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

12268 SW 148 TERR
MIAMI, FL 33186

New Principal Place of Business:

10801SW 123 STREET
MIAMI, FL 33176

Current Mailing Address:

12268 SW 148 TERR
MIAMI, FL 33186

New Mailing Address:

P O BOX 160118
MIAMI, FL 33116

FEI Number: 03-0465924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, ESTEBAN
14001 SW 104TH AVE
MIAMI, FL 33176 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TIMMER, HARVEY
Address: 12268 SW 148 TERR
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TIMMER, HARVEY
Address: 10801 SW 123 STREET
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARVEY TIMMER

D

08/10/2004

Electronic Signature of Signing Officer or Director

Date