

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000052934

FILED
May 01, 2008
Secretary of State

Entity Name: NICK INSURANCE & FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

13200 SW 128 STREET
BLDG. G-4
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

P O BOX 160118
MIAMI, FL 33116

New Mailing Address:

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: 13200 SW 128 STREET
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TIMMER, HARVEY
Address: 10725 SW 134 TER
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify 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: HARVEY TIMMER

D

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date