2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005
Secretary of State

DOCUMENT# P03000035557

Entity Name: ALPHA & OMEGA INSURANCE OF NAPLES INC.

Current Principal Place of Business:

2727 BAYSHORE DR UNIT #101
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

2727 BAYSHORE DR UNIT #101
NAPLES, FL 34112

New Mailing Address:

FEI Number: 90-0065187 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ, MAYRA E
4126 GREEN BLVD #2
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

PEREZ, MAYRA E
3626 13TH AVE SW
NAPLES, FL 34117 US

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: 02/28/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: PEREZ, MAYRA E
Address: 4126 GREEN BLVD., #2
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: PEREZ, MAYRA E
Address: 3626 13TH AVE SW
City-St-Zip: NAPLES, FL 34117

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: MAYRA PEREZ PSTD 02/28/2005
Electronic Signature of Signing Officer or Director — Date