

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000061191

FILED  
Jan 30, 2008  
Secretary of State

**Entity Name:** WEST COAST INSURANCE CONSULTANTS, INC.

**Current Principal Place of Business:**

12361 S.W. 128 COURT SUITE 206  
MIAMI, FL 33186

**New Principal Place of Business:**

5325 S.W. 8 STREET  
CORAL GABLES, FL 33134-226 US

**Current Mailing Address:**

PO BOX 520574  
MIAMI, FL 33152 05

**New Mailing Address:**

**FEI Number:** 20-0139519      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BATISTA, SONIA  
440 SW 81 AVENUE  
MIAMI, FL 33144 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: P ( ) Delete  
Name: BATISTA, SONIA  
Address: 320 NW 72 AVENUE  
City-St-Zip: MIAMI, FL 33126

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

Title: P (X) Change ( ) Addition  
Name: BATISTA, SONIA  
Address: 440 S.W. 81 AVENUE  
City-St-Zip: MIAMI, FL 33144

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: SONIA BATISTA

PRE

01/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date