

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000060319

FILED
Apr 18, 2008
Secretary of State

Entity Name: EAGLE INSURANCE OF SOUTH MIAMI, INC.

Current Principal Place of Business:

9664 CORAL WAY
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

9664 CORAL WAY
MIAMI, FL 33165

New Mailing Address:

FEI Number: 20-2691735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHERSHEVSKY, LARRY
1910 SWEET BAY WAY
HOLLYWOOD, FL 33019 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: VT () Delete
Name: MEITE, MARIBEL
Address: 9257 SW 37 STREET
City-St-Zip: MIAMI, FL 331654121

Title: S () Delete
Name: SHERSHEVSKY, LARRY
Address: 3208 NE 40TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVT (X) Change () Addition
Name: MEITE, MARIBEL
Address: 9257 SW 37 STREET
City-St-Zip: MIAMI, FL 331654121

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

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: MARIBEL MEITE

VPT

04/18/2008

Electronic Signature of Signing Officer or Director

Date