2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# P93000055059

Entity Name: EXCELLENCE INSURANCE BROKERS INC.

Current Principal Place of Business:

3801 SW 107 AVE.
MIAMI, FL 33165 US

New Principal Place of Business:

Current Mailing Address:

3801 SW 107 AVE.
MIAMI, FL 33165 US

New Mailing Address:

FEI Number: 65-0469534 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALVAREZ, MARCOS A
9301 SW. 56 ST. SUITE G
MIAMI, FL 33175 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALVAREZ, MARCOS A
Address: 12228 SW TERRRACE
City-St-Zip: MIAMI, FL 33183

Title: VP ( ) Delete
Name: ANIUVYS, ALVAREZ
Address: 12228 SW 82 TERRACE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARCOS ALVAREZ PS 02/19/2009

Electronic Signature of Signing Officer or Director Date