

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
May 31, 2006  
Secretary of State**

DOCUMENT# P95000093574

Entity Name: SECURITY PREMIUM FINANCE, INC.

**Current Principal Place of Business:**

SECURITY PREMIUM  
140 NW 57TH AVE.  
MIAMI, FL 33126

**New Principal Place of Business:**

SECURITY PREMIUM  
5959 BLUE LAGOON DRIVE SUITE 302  
MIAMI, FL 33126

**Current Mailing Address:**

140 N W 57TH AVE  
MIAMI, FL 33126

**New Mailing Address:**

5959 BLUE LAGOON DRIVE  
SUITE 302  
MIAMI, FL 33126

FEI Number: 65-0653408      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BERT ALEXANDER & ASSOCIATES  
4871 SW 74TH TERR  
MIAMI, FL 33143      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: DP      ( ) Delete  
Name: IRIGOYEN, HUMBERTO L  
Address: 4871 SW 74TH TERR  
City-St-Zip: MIAMI, FL 33143

Title: D      ( ) Delete  
Name: QUINTANA, JOSE J  
Address: 2151 SW 139TH CT  
City-St-Zip: MIAMI, FL 33175

Title: V      ( ) Delete  
Name: PRADO, ZUNILDA  
Address: 6441 SW 21 STREET  
City-St-Zip: MIAMI, FL 33155

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

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

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 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: ZUNILDA PRADO

V

05/31/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date