2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000023905

1. Entity Name
INSURANCE CORPORATE CONSULTANTS, INC.

Principal Place of Business	Mailing Address
2600 DOUGLAS ROAD STE 1101 MIAMI, FL 33134 US	2600 DOUGLAS ROAD STE 1101 MIAMI, FL 33134 US

04052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0819395
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RIVERO, RAUL E
811 SUNSET ROAD
CORAL GABLES, FL 33143

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, type or print name of registered agent and title if applicable. (If the Registered Agent signature required when amended)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

100000050399S
04/26/06-80055-012 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RIVERO, RAUL E
STREET ADDRESS	811 SUNSET RD
CITY-ST-ZIP	CORAL SPRINGS, FL 33143
TITLE	VP
NAME	BERMUDEZ, MARTIN
STREET ADDRESS	811 SUNSET ROAD
CITY-ST-ZIP	CORAL GABLES, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Raul E. Rivero 4-7-06
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date

305-443-993