

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 428276

FILED
Sep 11, 2007
Secretary of State

Entity Name: ASSOCIATED INSURANCE BROKERS, INC.

Current Principal Place of Business:

3020 NW 79TH AVENUE
MIAMI, FL 33122 US

New Principal Place of Business:

4227 SW 71ST AVENUE
MIAMI, FL 33155 US

Current Mailing Address:

3020 NW 79TH AVENUE
MIAMI, FL 33122 US

New Mailing Address:

4227 SW 71ST AVENUE
MIAMI, FL 33155 US

FEI Number: 59-1468772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, ANNETTE R
3020 NW 79TH AVENUE
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

ALVAREZ, ANNETTE R
4227 SW 71ST AVENUE
MIAMI, FL 33155 US

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: JOSE M ALVAREZ

09/11/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: ALVAREZ, JOSE M
Address: 3020 NW 79TH AVENUE
City-St-Zip: MIAMI, FL 33122

Title: SVAS (X) Delete
Name: SOTO, JOHN M
Address: 3020 NW 79TH AVENUE
City-St-Zip: MIAMI, FL 33122

Title: VP () Delete
Name: ALVAREZ, ANETTE R
Address: 3020 NW 79TH AVENUE
City-St-Zip: MIAMI, FL 33122

Title: VP () Delete
Name: ALVAREZ, DAVID M
Address: 3020 NW 79TH AVENUE
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: ALVAREZ, JOSE M
Address: 4227 SW 71ST AVENUE
City-St-Zip: MIAMI, FL 33155

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

Title: VP (X) Change () Addition
Name: ALVAREZ, ANETTE R
Address: 4227 SW 71ST AVENUE
City-St-Zip: MIAMI, FL 33155

Title: VP (X) Change () Addition
Name: ALVAREZ, DAVID M
Address: 4227 SW 71ST AVENUE
City-St-Zip: MIAMI, FL 33155

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: JOSE M ALVAREZ

PCD

09/11/2007

Electronic Signature of Signing Officer or Director

Date