2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 498525

FILED Jul 06, 2007 Secretary of State

Entity Name: INTERNATIONAL INSURANCE CENTER, INC.

urrent P	rincipal Place	e of Business:	New Principal Place	of Business:
	KENDALL DRI	VE		
16 IIAMI, FL	331861834 U	JS		
urrent M	lailing Addre	ss:	New Mailing Addres	s:
2515 N. k	KENDALL DRI	VE		
UITE 116 IIAMI, FL	ร์ 331861834 เ	JS		
	: 59-1982760	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
2515 N. k	., EDWARD KENDALL DRI 33186 US			
IMIVII, I L	00100 00			
ne above			ourpose of changing its registere	ed office or registered agent, or both
ne above the State	named entity e of Florida. RE:	submits this statement for the բ		ed office or registered agent, or both
he above	named entity e of Florida. RE:			ed office or registered agent, or both
he above the State IGNATUI	e named entity e of Florida. RE: Electro ce with s. 607.19	submits this statement for the particles of Registered Agos (2)(b), F.S., the corporation did no	ent	
he above the State IGNATUI accordan ection Cal	e named entity e of Florida. RE: Electro ce with s. 607.19	submits this statement for the particles of Registered Agrand (b), F.S., the corporation did not grow frust Fund Contribution ().	ent ot receive the prior notice.	
ne above the State IGNATUI accordan ection Cal	e named entity e of Florida. RE: Electro ce with s. 607.19 mpaign Financir S AND DIREC	submits this statement for the particles of Registered Agrange (2)(b), F.S., the corporation did not get the following the follo	ent ot receive the prior notice.	Date
ne above the State GNATUI accordan ection Car FFICER: lle: ame: ldress:	e named entity e of Florida. RE: Electro ce with s. 607.19 mpaign Financir S AND DIRECT P (CABASSA, ED 10104 SW 137 MIAMI, FL 337 V (FISK, MARIA 20815 NW 38	submits this statement for the price Signature of Registered Agraga(2)(b), F.S., the corporation did not growth from Contribution (). CTORS:) Delete WARD I TERRACE 176) Delete	ent ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

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: EDWARD CABASSA PRES 07/06/2007