

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 569215

FILED
Apr 29, 2009
Secretary of State

Entity Name: ANAMAR INSURANCE AGENCY, INC.

Current Principal Place of Business:

1234 EAST
HIALEAH, FL 33010 US

New Principal Place of Business:

Current Mailing Address:

1234 EAST
HIALEAH, FL 33010 US

New Mailing Address:

FEI Number: 59-1819398 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MORLANNE, ADRIAN
4730 WEST 8 AVE
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

MORLANNE, LAUREN
4730 WEST 8 AVE
HIALEAH, FL 33012 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: LAUREN MORLANNE

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: DRUJININA, ALLA
Address: 6301 SOUTH WEST 185 WAY
City-St-Zip: FT. LAUDERDALE, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: DRUJININA, ALLA
Address: 1230 E 4TH AVE
City-St-Zip: HIALEAH, FL 33010

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: A. MORLANNE

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date