

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001392

Entity Name: INSUREX, INC

FILED
Feb 16, 2006
Secretary of State

Current Principal Place of Business:

11999 KATY FREEWAY, STE 160
HOUSTON, TX 77079

New Principal Place of Business:

Current Mailing Address:

11999 KATY FREEWAY, STE 160
HOUSTON, TX 77079

New Mailing Address:

FEI Number: 76-0440927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEXISNEXIS DOCUMENT SOLUTIONS INC
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: HAMILTON, KURT
Address: 1160 THOUSAND OAKS
City-St-Zip: HERNANDO, MS 38632

Title: P () Delete
Name: BYRD, TAMMY J
Address: 11999 KATY FREEWAY STE 160
City-St-Zip: HOUSTON, TX 77079

Title: S () Delete
Name: BYRD, TAMMY J
Address: 11999 KATY FREEWAY STE 160
City-St-Zip: HOUSTON, TX 77079

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: HAMILTON, KURT
Address: 1160 THOUSAND OAKS
City-St-Zip: HERNANDO, MS 38632

Title: PRES (X) Change () Addition
Name: BYRD, TAMMY J
Address: 11999 KATY FREEWAY STE 160
City-St-Zip: HOUSTON, TX 77079

Title: SECY (X) Change () Addition
Name: BYRD, TAMMY J
Address: 11999 KATY FREEWAY STE 160
City-St-Zip: HOUSTON, TX 77079

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: TAMMY J BYRD

PRES

02/16/2006

Electronic Signature of Signing Officer or Director

Date