

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G11383

FILED
Mar 22, 2004
Secretary of State

Entity Name: SPECIALTY UNDERWRITERS INSURANCE, INC.

Current Principal Place of Business:

1021 IVES DIARY RD.
STE. 109
MIAMI, FL 33179 US

New Principal Place of Business:

Current Mailing Address:

1021 IVES DAIRY RD.
STE. 109
MIAMI, FL 33179 US

New Mailing Address:

FEI Number: 59-2247541 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWRENCE HORWITZ
1021 IVES DAIRY RD
STE. 109
MIAMI, FL 33179 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: DST () Delete
Name: HORWITZ, LAWRENCE,
Address: 1021 IVES DIARY RD., #109
City-St-Zip: MIAMI, FL

Title: DP () Delete
Name: KOCH, ROBERT,
Address: 1021 IVES DIARY DR., #109
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: HORWITZ, LAWRENCE,
Address: 1021 IVES DIARY RD., #109
City-St-Zip: MIAMI, FL 33179 US

Title: DP (X) Change () Addition
Name: KOCH, ROBERT,
Address: 1021 IVES DIARY DR., #109
City-St-Zip: MIAMI, FL 33179 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HORWITZ, LAWRENCE

VP

03/22/2004

Electronic Signature of Signing Officer or Director

_____ Date