2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G95138

Jan 28, 2005
Secretary of State

Entity Name: BREITBART INSURANCE CORPORATION

Current Principal Place of Business: New Principal Place of Business:

800 CYPRESS CREEK RD SUITE 400

FT. LAUDERDALE, FL 33334 US

Current Mailing Address: New Mailing Address:

P.O. DRAWER 9328

FT. LAUDERDALE, FL 33309 US

FEI Number: 59-2415183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEVEN BREITBART 5800 N. ANDREWS AVE.

FT. LAUDERDALE, FL 33309 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:

= _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FILED

Name: BREITBART, STEVEN,
Address: 5800 N. ANDREWS AVE.

Name: BREITBART, STEVEN,
Address: P O DRAWER 9328

City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: FORT LAUDERDALE, FL 33310

Title: S () Delete Title: () Change () Addition

 Name:
 BREITBART, SUSAN R
 Name:

 Address:
 5090 SW 89 TERR.
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33328
 City-St-Zip:

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: STEVEN BREITBART P 01/28/2005