2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 19, 2004
Secretary of State

DOCUMENT# K17558

Entity Name: ASSURANCE UNDERWRITERS, INC.

Current Principal Place of Business:

15210 SW 154 TERR
MIAMI, FL 33187 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 650190
SUITE 400
MIAMI, FL 33265 US

New Mailing Address:

FEI Number: 65-0036403 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUNON, LUIS J
15210 SW 154TH TERR
MIAMI, FL 33187 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TUNON, LUIS J
Address: 175 FOUNTAINBLEAU BLVD, SUITE 2G1
City-St-Zip: MIAMI, FL 33172

Title: S ( ) Delete
Name: TUNON, AYMARA
Address: 175 FONTAINBLEAU BLVD, SUITE 2G1
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TUNON, LUIS J
Address: 15210 SW 154TH TERRACE
City-St-Zip: MIAMI, FL 33187

Title: STD (X) Change ( ) Addition
Name: TUNON, AYMARA
Address: 15210 SW 154TH TERRACE
City-St-Zip: MIAMI, FL 33187

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: AYMARA M TUNON STD 10/19/2004

Electronic Signature of Signing Officer or Director Date