

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K98286

FILED  
Mar 15, 2008  
Secretary of State

Entity Name: SUN STATE INSURANCE AND AUTO TAG CENTER, INC.

**Current Principal Place of Business:**

1076 W SAMPLE RD.  
POMPAN0 BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

1076 W SAMPLE RD.  
POMPAN0 BEACH, FL 33064

**New Mailing Address:**

FEI Number: 65-0137894

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAPPER, JAMES  
1076 W SAMPLE RD.  
POMPAN0 BEACH, FL 33064 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: DP ( ) Delete  
Name: TAPPER, JAMES,  
Address: 11000 NW 17TH PLACE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DV ( ) Delete  
Name: TAPPER, JANICE,  
Address: 11000 NW 17TH PLACE  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES TAPPER

DP

03/15/2008

Electronic Signature of Signing Officer or Director

Date