2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 18, 2005
Secretary of State

DOCUMENT# L01000009036

Entity Name: EUROPEAN INSURANCE SERVICES, LLC

Current Principal Place of Business:

100 SE 2ND STREET
SUITE 2610
MIAMI, FL 33131

New Principal Place of Business:

100 SE SECOND STREET
SUITE 2610
MIAMI, FL 33131

Current Mailing Address:

100 SE 2ND STREET
SUITE 2610
MIAMI, FL 33131

New Mailing Address:

100 SE SECOND STREET
SUITE 2610
MIAMI, FL 33131

FEI Number: 65-1110349 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GLOBAL EXPANSION & CONSULTING, LLC
100 SE 2ND STREET
SUITE 2610
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

GLOBAL EXPANSION & CONSULTING, LLC
100 SE SECOND STREET
SUITE 2610
MIAMI, FL 33131 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: ALEXANDER REUS 07/18/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LUDWIG, UDO
Address: 100 SE 2ND STREET, SUITE 2610
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LUDWIG, UDO
Address: 100 SE SECOND STREET, SUITE 2610
City-St-Zip: MIAMI, FL 33131

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: UDO LUDWIG MGRM 07/18/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date