

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028793

FILED
Apr 30, 2007
Secretary of State

Entity Name: INSURETEMP SERVICES, LLC

Current Principal Place of Business:

4250 GALT OCEAN DR
15-L
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

4250 GALT OCEAN DR
15-L
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 74-3067637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LA FUENTE, MARIA C
4250 GALT OCEAN DR 15-L
FORT LAUDERDALE, FL 33308 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DELAFUENTE, MARIA C
Address: 4250 GALT OCEAN DR., 15-L
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR () Delete
Name: DE LA FUENTE, BEN
Address: 4250 GALT OCEAN DRIVE, 15-L
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

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 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: MARIA DE LA FUENTE

MGRM

04/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date