

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037607

FILED
Jun 30, 2006
Secretary of State

Entity Name: A.M.T. INSURANCE GROUP, LLC

Current Principal Place of Business:

18671 COLLINS AVENUE, UNIT 3102
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

18671 COLLINS AVENUE, UNIT 3102
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 20-2695213 **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:

Name and Address of New Registered Agent:

HODES, SCOTT E ESQ
SETH E ELLIS, P.A.
2385 EXECUTIVE CENTER DRIVE, SUITE 190
BOCA RATON, FL 33431 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TOPCHIK, ALAN MICHAEL
Address: 18671 COLLINS AVENUE, UNIT 3102
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAN TOPCHIK

MGRM

06/30/2006

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