2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L92846

FILED Apr 25, 2006 Secretary of State

Entity Name: FIRST SECURITY INSURANCE UNDERWRITERS, INC.

Current Principal Place of Business: New Principal Place of Business:

8300 W. FLAGLER ST. 3020 NW 79TH AVENUE 250 MIAMI, FL 33122 US

MIAMI, FL 33144 US

Current Mailing Address: New Mailing Address:

8300 W. FLAGLER ST. 3020 NW 79TH AVENUE 250 MIAMI, FL 33122 US

250 MIAMI, FL 33122 US MIAMI, FL 33144 US

FEI Number: 65-0216083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALVAREZ, ANETTE R
8300 W. FLAGER ST.
SUITE 250
MIAMI, FL 33144 US

ALVAREZ, ANETTE R
3020 NW 79TH AVENUE
MIAMI, FL 33122 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: 04/25/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VM () Delete Title: VM (X) Change () Addition Name: ALVAREZ, ANETTE R Name: ALVAREZ, ANETTE R

Address: 8300 W. FLGER ST. SUITE 250 Address: 3020 NW 79TH AVENUE

City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33122

Title: DCP () Delete Title: DCP (X) Change () Addition
Name: ALVAREZ, JOSE M
Address: 2000 NM, FLACER ST.

 Address:
 8300 W. FLAGER ST.
 Address:
 3020 NW 79TH AVENUE

 City-St-Zip:
 MIAMI, FL 33144
 City-St-Zip:
 MIAMI, FL 33122

Title: DASV () Delete Title: DASV (X) Change () Addition

 Name:
 SOTO, JOHN M
 Name:
 SOTO, JOHN M

 Address:
 8300 W. FLGER ST. SUITE 250
 Address:
 3020 NW 79TH AVENUE

 City-St-Zip:
 MIAMI, FL 33144
 City-St-Zip:
 MIAMI, FL 33122

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 ALVAREZ, DÂVÎD M
 Name:
 ALVAREZ, DÂVÎD M

 Address:
 8300 W. FLAGER ST., STE 250
 Address:
 3020 NW 79TH AVENUE

 City-St-Zip:
 MIAMI, FL 33144
 City-St-Zip:
 MIAMI, FL 33122

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 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: ANETTE R ALVAREZ VM 04/25/2006