2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# M17629

Entity Name: AMERICAN BONDING & INSURANCE AGENCY, INC.

Current Principal Place of Business:

2299 SW 27 AVENUE
#200
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

2299 SW 27 AVENUE
#200
MIAMI, FL 33145

New Mailing Address:

FEI Number: 65-0595313 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEFABIO, JOEL
2121 PONCE DE LEON BLVD., #430
CORAL GABLES, FL 33134 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: S ( ) Delete
Name: MASTRAPA, JOE
Address: 2299 SW 27 AVENUE NO. 200
City-St-Zip: MIAMI, FL 33145

Title: P ( ) Delete
Name: MORALES, STEVEN
Address: 2299 SW 27 AVENUE
City-St-Zip: MIAMI, FL 33145

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 for the exemption stated in Section 119.07(3)(i), 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: JOE MASTRAPA S 04/29/2005

Electronic Signature of Signing Officer or Director — Date