

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M43378

FILED
Apr 25, 2008
Secretary of State

Entity Name: ROESONS INSURANCE SERVICES, INC.

Current Principal Place of Business:

15280 NW 79TH COURT
SUITE 102
MIAMI LAKES, FL 33016 US

New Principal Place of Business:

Current Mailing Address:

15280 NW 79TH COURT
SUITE 102
MIAMI LAKES, FL 33016 US

New Mailing Address:

FEI Number: 59-2800733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POOLE GOLDSTEIN LLC
13450 WEST SUNRISE BOULEVARD
SUITE 150
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

GOLDSTEIN,ZUGMAN,WEINSTEIN & POOLE LLC.
300 SOUTH PINE ISLAND ROAD
SUITE 300
PLANTATION, FL 33324 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: POOLE GOLDSTEIN LLC

04/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROE, BRIAN D
Address: 15401 SW 82ND AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: ROE, CHRISTOPHER
Address: 15401 SW 82ND AVENUE
City-St-Zip: MIAMI, FL 33157

Title: T () Delete
Name: ROSADO, SILVINO
Address: 6 FORT STREET
City-St-Zip: BELIZE CITY, BELIZE, OC

Title: S () Delete
Name: PATRICK, MARTHA M
Address: 7170 FAIRWAY DRIVE #M-7
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: MARTHA PATRICK

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04/25/2008

Electronic Signature of Signing Officer or Director

Date