

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M58119

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: BARINAGA INSURANCE AGENCY INC.

## Current Principal Place of Business:

1250 SW 27 AVE  
STE. #204  
MIAMI, FL 33135 US

## New Principal Place of Business:

## Current Mailing Address:

1250 SW 27 AVE  
STE. #204  
MIAMI, FL 33135 US

## New Mailing Address:

FEI Number: 65-0004455      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MACHADO, CARLOS M  
101 MADEIRA AV  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

MACHADO, CARLOS M  
2030 DOUGLAS ROAD #210  
CORAL GABLES, FL 33134 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: \_\_\_\_\_

04/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: STD (X) Delete  
Name: BARINAGA, JUAN C.,  
Address: 1250 S.W. 27TH AVE  
City-St-Zip: MIAMI, FL

Title: PD ( ) Delete  
Name: BARINAGA, JORGE L. S.,  
Address: 1250 S.W. 27TH AVE  
City-St-Zip: MIAMI, FL

Title: D (X) Delete  
Name: SAIDY S. BARINAGA,  
Address: 1250 SW 27TH AVE.  
City-St-Zip: MIAMI, FL 33135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PSTD (X) Change ( ) Addition  
Name: BARINAGA, JORGE L.,  
Address: 1250 S.W. 27TH AVE  
City-St-Zip: MIAMI, FL

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 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: JORGE L BARINAGA

P

04/12/2007

Electronic Signature of Signing Officer or Director

Date