

# **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P00000048250

Entity Name: MIRAMAR INSURANCE CORP.

**FILED**  
**Oct 25, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

2853 EXECUTIVE PARK DRIVE  
SUITE 201  
WESTON, FL 33331

## **New Principal Place of Business:**

117 W HOWRY AVE  
DELAND, FL 32720

## **Current Mailing Address:**

318 INDIAN TRACE  
#451  
WESTON, FL 33326

## **New Mailing Address:**

PO BOX 327923  
FT LAUDERDALE, FL 33332

FEI Number: 65-1009448

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

HUTNER LAW FIRM PLLC  
2853 EXECUTIVE PARK DRIVE  
SUITE 101  
WESTON, FL 33331 US

## **Name and Address of New Registered Agent:**

GAMBOA, JAIME  
117 W HOWRY AVE  
DELAND, FL 32720 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: JAIME GAMBOA

10/25/2007

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: GAMBOA, JAIME  
Address: 318 INDIAN TRACE #451  
City-St-Zip: WESTON, FL 33326

Title: D (X) Delete  
Name: HUTNER, MARK A D  
Address: 2853 EXECUTIVE PARK DRIVE SUITE 101  
City-St-Zip: WESTON, FL 33331

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: GAMBOA, JAIME  
Address: PO BOX 327923  
City-St-Zip: WESTON, FL 33332

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: JAIME GAMBOA

P

10/25/2007

Electronic Signature of Signing Officer or Director

Date