2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000057649

FILED Mar 07, 2008 Secretary of State

Entity Name: JEFFREY M. EPSTEIN INSURANCE AGENCY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
925 SW UITE 210 IIAMI, FL				
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
925 SW UITE210 IIAMI, FL			8925 SW 148TH ST, SUITE 210 MIAMI, FL 33176	
El Number	: 65-1017986	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
ATEL, IS 341 SW IIAMI, FL	155 CT			
,				
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both
	e of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both
the Stat	e of Florida. ´ RE:	submits this statement for the place is submits this statement for the place is submits the place is submits the place is submits.		ed office or registered agent, or both
the Stat	e of Florida. RE: Electron			
the State	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	
the State	e of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Aggrust Fund Contribution (). TORS: Delete	ent	Date
the State IGNATU Rection Car OFFICER tte: ame: ddress:	e of Florida. RE: Electron mpaign Financing S AND DIREC V () PATEL, BIMAL 4341 SW 155 C MIAMI, FL 3318	ic Signature of Registered Agr g Trust Fund Contribution (). TORS: Delete T B5 Delete R H CT.	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTO

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: ISHWER PATEL P 03/07/2008