

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000059292

FILED
Apr 30, 2008
Secretary of State

Entity Name: LAKES INSURANCE GROUP, CORP.

Current Principal Place of Business:

15315 NW 60TH AVENUE
SUITE G
MIAMI LAKES, FL 33014

New Principal Place of Business:

15327 NW 60 AVENUE
SUITE 202
MIAMI LAKES, FL 33014

Current Mailing Address:

15315 NW 60TH AVENUE
SUITE G
MIAMI LAKES, FL 33014

New Mailing Address:

15327 NW 60 AVENUE
SUITE 202
MIAMI LAKES, FL 33014

FEI Number: 65-1017521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE POMBO, MARIA XIMENA
1031 NW 79TH AVENUE
#704
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

DE POMBO, MARIA XIMENA
16380 BRIAR PATCH PLACE
MIAMI LAKES, FL 33014 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PR () Delete
Name: DE POMBO, MARIA XIMENA
Address: 1031 NW 79TH AVENUE, UNIT 704
City-St-Zip: PLANTATION, FL 33322

Title: VP () Delete
Name: GARCIA, NIDIA M
Address: 16380 BRIAR PATCH PLACE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR (X) Change () Addition
Name: DE POMBO, MARIA XIMENA
Address: 16380 BRIAR PATCH PLACE
City-St-Zip: MIAMI LAKES, FL 33014

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: MARIA X DE POMBO

PR

04/30/2008

Electronic Signature of Signing Officer or Director

Date