

2008 FOR PROFIT CORPORATION
AMENDED ANNUAL REPORT

FILED

DOCUMENT # P00000064008

1. Entity Name
UNITED AUTOMOBILE INSURANCE GROUP, INC.



2008 JUN 19 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
3909 NE 163RD ST, STE 304
N MIAMI BEACH, FL 33160

Mailing Address
3909 NE 163RD ST, STE 304
N MIAMI BEACH, FL 33160

2. Principal Place of Business - No P.O. Box #
1313 NW 167 Street

3. Mailing Address
1313 NW 167 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami Gardens, FL

City & State
Miami Gardens, FL

Zip
33169

Country
USA

Zip
33169

Country
USA

06052008 Chg-P CR2E034 (12/06)

4. FEI Number
65-1037280

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRIMSLEY, CHARLES J ESQ
3909 NE 163RD ST, STE 304
NORTH MIAMI BEACH, FL 33160

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
1313 NW 167 Street

City Miami Gardens,

FL

Zip 33169

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Charles J. Grimsley

6/12/08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

QSS

10. OFFICERS AND DIRECTORS

TITLE	D	☐ Delete
NAME	PARRILLO, RICHARD P SR	
STREET ADDRESS	3909 NE 163RD ST, STE 304	
CITY-ST-ZIP	N MIAMI BEACH, FL 33160	
TITLE	STD	☐ Delete
NAME	PARRILLO, MICHAEL R	
STREET ADDRESS	3909 NE 163RD ST, STE 304	
CITY-ST-ZIP	N MIAMI BEACH, FL 33160	
TITLE	D	☐ Delete
NAME	PARRILLO, BEAU W	
STREET ADDRESS	3909 NE 163RD ST, STE 304	
CITY-ST-ZIP	N MIAMI BEACH, FL 33160	
TITLE	D	☐ Delete
NAME	MCCARTHY, PATRICK A	
STREET ADDRESS	3909 NE 163RD ST, STE 304	
CITY-ST-ZIP	N MIAMI BEACH, FL 33160	
TITLE	PD	☐ Delete
NAME	RAMIREZ, JACK	
STREET ADDRESS	3909 NE 163RD ST, STE 304	
CITY-ST-ZIP	N MIAMI BEACH, FL 33160	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME	1313 NW 167 Street	
STREET ADDRESS	Miami Gardens, FL 33169	
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME	1313 NW 167 Street	
STREET ADDRESS	Miami Gardens, FL 33169	
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME	1313 NW 167 Street	
STREET ADDRESS	Miami Gardens, FL 33169	
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME	1313 NW 167 Street	
STREET ADDRESS	Miami Gardens, FL 33169	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME	700131632517	
STREET ADDRESS	06/24/08--01038--018 **70.00	
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jack S Ramirez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACK S RAMIREZ 6/12/08 847612 8416
Date Daytime Phone #