

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000073377

FILED
Apr 10, 2003
Secretary of State

Entity Name: INSURANCE/SEGUROS OF AMERICA TWO, INC.

Current Principal Place of Business:

7248 NORTH DALE MABRY HIGHWAY
SUITE A
TAMPA, FL 33614

New Principal Place of Business:

4002 W. WATERS AVE.
SUITE 3
TAMPA, FL 33614

Current Mailing Address:

7248 NORTH DALE MABRY HIGHWAY
SUITE A
TAMPA, FL 33614

New Mailing Address:

4002 W. WATERS AVE
SUITE 3
TAMPA, FL 33614

FEI Number: 59-3661908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BAEZ, MANUEL R
7248 NORTH DALE MABRY HIGHWAY
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VSTD () Delete
Name: CABRERA, MATILDE
Address: 7248 NORTH DALE MABRY HIGHWAY #A
City-St-Zip: TAMPA, FL 33614

Title: PD () Delete
Name: BAEZ, MANUEL R
Address: 7248 NORTH DALE MABRY HIGHWAY #A
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VSTD (X) Change () Addition
Name: BAEZ, MANUEL R
Address: 4002 W. WATERS AVE STE 3
City-St-Zip: TAMPA, FL 33614

Title: PD (X) Change () Addition
Name: BAEZ, MANUEL R
Address: 4002 W. WATERS AVE SUITE 3
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MANUEL R. BAEZ

PD

04/10/2003

Electronic Signature of Signing Officer or Director

Date