

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000075017

Entity Name: CORAL REEF INSURANCE INC.

FILED
Apr 25, 2007
Secretary of State

Current Principal Place of Business:

15441 SW 137 AVE
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

15441 SW 137 AVE
MIAMI, FL 33177

New Mailing Address:

PO BOX 771555
MIAMI, FL 33177

FEI Number: 41-2067836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CEBALLOS, RALPH
15441 SW 137 AVE
MIAMI, FL 33177 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: ST () Delete
Name: CEBALLOS, RALPH
Address: 10510 SW 157 CT #302
City-St-Zip: MIAMI, FL 33196

Title: P () Delete
Name: CEBALLOS, RAFAEL
Address: 10510 SW 157 CT #302
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: CEBALLOS, RALPH
Address: 14852 SW 173 ST
City-St-Zip: MIAMI, FL 33187

Title: P (X) Change () Addition
Name: CEBALLOS, RAFAEL
Address: 14852 SW 173 ST
City-St-Zip: MIAMI, FL 33187

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: RALPH CEBALLOS

ST

04/25/2007

Electronic Signature of Signing Officer or Director

Date