

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000085984

FILED
Apr 26, 2004
Secretary of State

Entity Name: INSURANCE NETWORK,INC

Current Principal Place of Business:

459 NE 167TH ST
N MIAMI BCH, FL 33162

New Principal Place of Business:

Current Mailing Address:

459 NE 167TH ST
N MIAMI BCH, FL 33162

New Mailing Address:

FEI Number: 65-1142192

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOMSI, RANDA
459 NE 167TH ST
N MIAMI BCH, FL 33162 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: DP () Delete
Name: HOMSI, RANDA
Address: 459 NE 167TH ST
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RANDA HOMSI

PRES

04/26/2004

Electronic Signature of Signing Officer or Director

Date