

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000098760

FILED  
Mar 01, 2010  
Secretary of State

**Entity Name:** UNITED INSURANCE MARKETING CORPORATION

**Current Principal Place of Business:**

5600 N.W. 102 AVENUE  
SUITE M  
SUNRISE, FL 33351 US

**New Principal Place of Business:**

19453 NW 23 PL  
PEMBROKE PINES, FL 33029 US

**Current Mailing Address:**

5600 N.W. 102 AVENUE  
SUITE M  
SUNRISE, FL 33351 US

**New Mailing Address:**

19453 NW 23 PL  
PEMBROKE PINES, FL 33029 US

**FEI Number:** 65-1147107

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRESS, RONALD  
5600 NW 102 AVENUE, SUITE M  
SUNRISE, FL 33351 US

**Name and Address of New Registered Agent:**

GRESS, RONALD  
19453 NW 23 PL  
PEMBROKE PINES, FL 33029 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:

03/01/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GRESS, RONALD  
Address: 19453 NW 23 PL  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D  
Name: GOLDSTEIN, BERNARD  
Address: 19453 NW 23 PL  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D  
Name: DINOLFO, GERLANDO C  
Address: 19453 NW 23 PL  
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby 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 all other like empowered.

SIGNATURE: RONALD GRESS

D

03/01/2010

Electronic Signature of Signing Officer or Director

Date