2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2010
Secretary of State

DOCUMENT# P01000107299

Entity Name: INSURANCE & HEALTHCARE ASSOCIATES, INC.

Current Principal Place of Business:

3350 SW 148TH AVE.
SUITE 220
MIRAMAR, FL 33027

New Principal Place of Business:

1400 SAINT CHARLES PLACE
SUITE 320
MIRAMAR, FL 33026

Current Mailing Address:

PO BOX 821272
SOUTH FLORIDA, FL 33082

New Mailing Address:

1400 SAINT CHARLES PLACE
SUITE 320
MIRAMAR, FL 33026

FEI Number: 65-1150903 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PSTD
Name: SMILEY, TRASSA D
Address: 1400 SAINT CHARLES PLACE #320
City-St-Zip: MIRAMAR, FL 33026

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: TSMILEY PRES 04/28/2010

Electronic Signature of Signing Officer or Director — Date