2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000023189

Entity Name: SAVI JHAGRU INSURANCE AGENCY INC.

FILED Apr 20, 2007 Secretary of State

2641 N ANDREWS AVE STE A 4747 N OCEAN BLVD 240

FT LAUDERDALE, FL 33311

LAUDERDALE BY THE SEA, FL 33308

Current Mailing Address: New Mailing Address:

2641 N ANDREWS AVE STE A 4747 N OCEAN BLVD

FT LAUDERDALE, FL 33311

LAUDERDALE BY THE SEA, FL 33308

FEI Number: 02-0550493 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JHAGRU, SAVITRI JHAGRU, SAVITRI 2641 N ANDREWS AVE STE A 4747 N OCEAN BLVD

FT LAUDERDALE, FL 33311 240

LAUDERDALE BY THE SEA, FL 33308 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: SAVITRI JHAGRU 04/20/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

JHAGRU, SAVITRI JHAGRU, SAVITRI Name: Name: 2641 N ANDREWS AVE STE A 4747 N OCEAN BLVD, STE 240 Address: Address: City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: Title: () Delete (X) Change () Addition

JHAGRU, ROSHAN Name: JHAGRU, ROSHAN Name:

2641 N ANDREWS AVE STE A 4747 N OCEAN BLVD, STE 240 Address: Address: LAUDERDALE BY THE SEA, FL 33308 FT LAUDERDALE, FL 33311 City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete

JHAGRU, ROSHAN Name: Name:

4747 N OCEAN BLVD, STE 240 Address Address:

City-St-Zip: City-St-Zip: LAUDERDALE BY THE SEA, FL 33308 US

Title: () Delete Title: () Change (X) Addition Name:

JHAGRU, SAVITRI Name:

Address: 4747 N OCEAN BLVD, STE 240

City-St-Zip: City-St-Zip: LAUDERDALE BY THE SEA, FL 33308 US

I hereby certify that the information supplied with this filing does not qualify for the 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: SAVITRI JHAGRU D 04/20/2007