

**2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000028645

**FILED  
Apr 14, 2011  
Secretary of State**

**Entity Name:** MIAMI GARDENS INSURANCE AND INVESTMENT, INC.

**Current Principal Place of Business:**

18300 NW 62ND AVENUE  
100  
MIAMI LAKES, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

18300 NW 62ND AVENUE  
100  
MIAMI LAKES, FL 33015

**New Mailing Address:**

**FEI Number:** 01-0627979      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HOWELL, HOWARD  
3390 62ND AVE NE  
NAPLES, FL 34120    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

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: HOWELL, HOWARD D  
Address: 18300 NW 62ND AVENUE #100  
City-St-Zip: MIAMI LAKES, FL 33015

Title: S  
Name: HOWELL, MARCIA  
Address: 18300 NW 62ND AVE #100  
City-St-Zip: MIAMI LAKES, FL 33015

Title: D  
Name: ANTHONY, DOYLEY  
Address: 18300 NW 62ND AVE #100  
City-St-Zip: MIAMI LAKES, FL 33015

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: HOWARD HOWELL

P

04/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date