2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006
Secretary of State

DOCUMENT# P02000033435

Entity Name: GARCIA FREYCENET INSURANCE AGENCY INC.

Current Principal Place of Business:

900 FOX VALLEY DR. SUITE 207
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

900 FOX VALLEY DR. SUITE 207
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 03-0413367 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FREYCENET, SUSY G
1460 AVALON BLVD
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

FREYCENET, SUSY G
573 SHINING ARMOR LANE
LONGWOOD, FL 32779 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: 03/14/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FREYCENET, SUSY G
Address: 1460 AVALON BLVD
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FREYCENET, SUSY G
Address: 573 SHINING ARMOR LANE
City-St-Zip: LONGWOOD, FL 32779

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: SUSAN GARCIA-FREYCENET D 03/14/2006
Electronic Signature of Signing Officer or Director — Date