2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2011
Secretary of State

DOCUMENT# P02000034555

Entity Name: MASKER FINANCIAL & INSURANCE GROUP INC.

Current Principal Place of Business:

8445 BOCA RIO DRIVE
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

8445 BOCA RIO DRIVE
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 04-3675534 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASKER INSURANCE & FINANCIAL SERVICES
8445 BOCA RIO ROAD
BOCA RATON, FL 33432 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: PRES
Name: MASKER, DALE A
Address: 8445 BOCA RIO DRIVE
City-St-Zip: BOCA RATON, FL 33432 US

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: DALE ANN MASKER P, D 05/01/2011

Electronic Signature of Signing Officer or Director Date