


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90071 026 ***150.00

DOCUMENT # P02000036772	
1. Entity Name LUIS G. GONZALEZ INSURANCE AGENCY, INC.	

Principal Place of Business 10828 NW 58TH ST. DORAL, FL 33178	Mailing Address 9100 S. DADELAND BLVD. STE. 1607 MIAMI, FL 33156
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05032007 No Chg-P CR2E034 (11/05)

4. FEI Number 14-1872155	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ATTORNEY CORPORATE REPORTING SERVICES, INC
 9100 S. DADELAND
 STE. 1607
 MIAMI, FL 33156

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	SD GONZALEZ, LUIS G 7295 W. 15TH AVENUE HIALEAH, FL 33014
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* *Attorney-in-fact* Date: 5-1-2007 Daytime Phone #: 305 670-1188