2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 03, 2006
Secretary of State

DOCUMENT# P02000077020

Entity Name: ANGELA INSURANCE AGENCY INC.

Current Principal Place of Business:

585 E 49 ST #20
20
HIALEAH, FL 33013

New Principal Place of Business:

585 E 49 ST #20
HIALEAH, FL 33013

Current Mailing Address:

585 E 49 ST #20
20
HIALEAH, FL 33013

New Mailing Address:

585 E 49 ST #20
HIALEAH, FL 33013

FEI Number: 01-0737276 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POWERS, ANGELA
571 E 35 ST
HIALEAH, FL 33013 US

Name and Address of New Registered Agent:

POWERS, ANGELA
571 E 35 ST #20
HIALEAH, FL 33013 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: ANGELA POWERS 11/03/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: POWERS, ANGELA
Address: 571 E 35 ST
City-St-Zip: HIALEAH, FL 33013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: POWERS, ANGELA
Address: 571 E 35 ST #20
City-St-Zip: HIALEAH, FL 33013

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: ANGELA POWERS P 11/03/2006
Electronic Signature of Signing Officer or Director Date