

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133178

FILED
Apr 29, 2005
Secretary of State

Entity Name: TOTAL INSURANCE CORPORATION

Current Principal Place of Business:

11710 NW SOUTH RIVER DR
STE 118
MEDLEY, FL 33178

New Principal Place of Business:

11710 NW SOUTH RIVER DR
STE 104
MEDLEY, FL 33178

Current Mailing Address:

11710 NW SOUTH RIVER DR
STE 118
MEDLEY, FL 33178

New Mailing Address:

11710 NW SOUTH RIVER DR
STE 104
MEDLEY, FL 33178

FEI Number: 51-0437982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODREGUEZ, LUIS F
18502 SW 354 TER
FLORIDA CITY, FL 33034 US

Name and Address of New Registered Agent:

RODRIGUEZ, LUIS F
18502 SW 354 TER
FLORIDA CITY, FL 33034 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: LUIS F. RODRIGUEZ

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: RODRIGUEZ, LUIS F
Address: 18502 SOUTHWEST 354TH TERRACE
City-St-Zip: FLORIDA CITY, FL 33034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIS F. RODRIGUEZ

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date