

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133178

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: TOTAL INSURANCE CORPORATION

**Current Principal Place of Business:**

11710 NW SOUTH RIVER DR  
STE 104  
MEDLEY, FL 33178 US

**New Principal Place of Business:**

**Current Mailing Address:**

11710 NW SOUTH RIVER DR  
STE 104  
MEDLEY, FL 33178 US

**New Mailing Address:**

FEI Number: 51-0437982

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RODRIGUEZ, LUIS F  
10775 NW 84 STREET  
UNIT 9  
DORAL, FL 33178 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RODRIGUEZ, LUIS F  
Address: 10775 NW 84 STREET UNIT 9  
City-St-Zip: DORAL, FL 33178 US

**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 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: LUIS F RODRIGUEZ

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date