2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2004
Secretary of State

DOCUMENT# P03000002822

Entity Name: INSURANCE SERVICING, INC.

Current Principal Place of Business:

499 SHERIDAN ST.
DANIA, FL 33004

New Principal Place of Business:

499 SHERIDAN ST.
4TH FLOOR
DANIA, FL 33004

Current Mailing Address:

499 SHERIDAN ST.
DANIA, FL 33004

New Mailing Address:

499 SHERIDAN ST.
4TH FLOOR
DANIA, FL 33004

FEI Number: 22-3889724 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAYER, ROBERT M
1320 S. DIXIE HWY., SUITE 811
CORAL GABLES, FL 33146 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: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Change (X) Addition
Name: SCHEIN, ALAN
Address: 499 E SHERIDAN ST, 4TH FLOOR
City-St-Zip: DANIA, FL 33004

Title: ST ( ) Change (X) Addition
Name: RAPP, ROBERT
Address: 499 E SHERIDAN ST, 4TH FLOOR
City-St-Zip: DANIA, FL 33004

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: ROBERT RAPP ST 04/13/2004

Electronic Signature of Signing Officer or Director — Date