

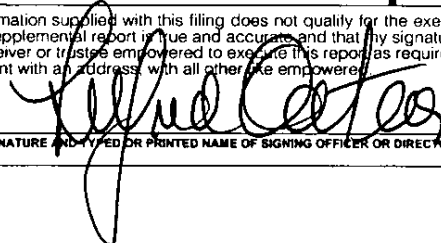


# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

<b>DOCUMENT # P03000019136</b> 1. Entity Name <b>COSMOPOLITAN INSURANCE, INC.</b>						<b>FILED</b> <b>07 OCT 16 AM 9:17</b> SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>3150 SOUTH CONGRESS AVE. PALM SPRINGS, FL 33461</b>				Mailing Address <b>3150 SOUTH CONGRESS AVE. PALM SPRINGS, FL 33461</b>			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country					
4. FEI Number <b>37-1458893</b>				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				10102007 Chg-P CR2E034 (12/06)			
<b>6. Name and Address of Current Registered Agent</b> <b>DATENA, INGRID</b> <b>1243 READING TERR.</b> <b>WELLINGTON, FL 33414</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE:</small>							
<b>Amended AR is \$61.25</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DATENA, INGRID N 1243 READING TERRACE WELLINGTON, FL 33414 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	UP EDUARDO G. DATENA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3150 S. CONGRESS AVE LAKE WORTH FL 33461		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SAR, DANIELA <input checked="" type="checkbox"/> Delete 3150 S CONGRESS AVE LAKE WORTH, FL 33461			TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST NATALIA G DATENA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3150 S. CONGRESS AVE L.W. FL 33461		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DATENA, INGRID <input checked="" type="checkbox"/> Delete 1234 READING TERR. WELLINGTON, FL 33414			TITLE NAME STREET ADDRESS CITY-ST-ZIP	60011086927E <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10/16/07--01065--007 **70.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: 				10-10-07 <sup>561</sup> 3529336			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>			