2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000034516

Entity Name: A.R.A. CASUALTY INSURANCE COMPANY, INC.

FILED May 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6600 S.W. 57TH AVE. SUITE 200 MIAMI, FL 33143

Current Mailing Address: New Mailing Address:

6600 S.W. 57TH AVE. SUITE 200 MIAMI, FL 33143

FEI Number: 68-0547002 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRYER, WARREN ABRAHAM, ANTHONY R

17500 N. BAY ROAD, APT. 607 6600 SW 57TH AVENUE, SUITE 200

NORTH MIAMI BEACH, FL 33160 US MIAMI, FL 33143 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: ANTHONY R. ABRAHAM 05/17/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: COB (X) Change () Addition

 Name:
 SCHAFER, JEFFERY L
 Name:
 ABRAHAM, ANTHONY R

 Address:
 8885 SW 154 TERRACE
 Address:
 6600 SW 57TH AVENUE, STE 200

City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33143

Title: D () Delete Title: PRES (X) Change () Addition Name: ABRAHAM, ANTHONY R Name: ABRAHAM, JOSEPH G

Address: 727 S. ALHAMBRA CIR. Address: 6600 SW 57TH AVENUE City-St-Zip: PEMBROKE PINES, FL 33025 City-St-Zip: MIAMI, FL 33143

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MALOUF, THOMAS H
 Name:
 MALOUF, THOMAS H

 Address:
 3115 MOSSVALE LANE
 Address:
 6600 SW 57TH AVENUE

 City-St-Zip:
 TAMPA, FL 33618
 City-St-Zip:
 MIAMI, FL 33143

Title: D () Delete Title: D (X) Change () Addition

Name:ABRAHAM, THOMAS GName:ABRAHAM, THOMAS GAddress:155 SOLANO PRADOAddress:6600 SW 57TH AVENUE

City-St-Zip: CORAL GABLES, FL 33618 City-St-Zip: MIAMI, FL 33143

Title: D () Delete Title: S/T (X) Change () Addition Name: BRYER, WARREN Name: ABRAHAM, NORMA J

 Name:
 BRYER, WARREN
 Name:
 ABRAHAM, NORMA J

 Address:
 17500 N BAY RD 607
 Address:
 6600 SW 57TH AVENUE

 City-St-Zip:
 NORTH MIAMI BEACH, FL 33160
 City-St-Zip:
 MIAMI, FL 33143

Title: D () Change (X) Addition

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: ANTHONY R. ABRAHAM COB 05/17/2006