

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000109694

FILED
Oct 12, 2004
Secretary of State

Entity Name: CARRERA INSURANCE UNDERWRITERS, INC.

Current Principal Place of Business:

2950 SW 18 STREET
MIAMI, FL 33135

New Principal Place of Business:

2955 SW 8 STREET.
SUITE 102
MIAMI, FL 33135

Current Mailing Address:

2950 SW 18 STREET
MIAMI, FL 33135

New Mailing Address:

2955 SW 8 STREET.
SUITE 102
MIAMI, FL 33135

FEI Number: 65-0334533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVILA, FRANKLIN
2950 SW 18 STREET
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

DAVILA, FRANKLIN
2955 SW 8 STREET
SUITE 102
MIAMI, FL 33135 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: FRANKLIN DAVILA

10/12/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAVILA, FRANKLIN
Address: 9910 E CALUSA CLUB DR
City-St-Zip: MIAMI, FL 33186

Title: VD () Delete
Name: STANKIEWICZ, INEZ
Address: 9910 E CALUSA CLUB DR
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: FRANKLIN DAVILA

PD

10/12/2004

Electronic Signature of Signing Officer or Director

Date