2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000036891

1. Entity Name
FAINSTEIN INSURANCE AGENCY, INC.

Principal Place of Business	Mailing Address
11332 SW 18TH CT	11332 SW 18TH CT
MIRAMAR, FL 33025	MIRAMAR, FL 33025

DO NOT WRITE IN THIS SPACE

01132007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
68-0579614	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FAINSTEIN, MANNY
11332 SW 18CT
MIRAMAR, FL 33025

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IN THIS SPACE

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_____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 After May 1, 2007 Fee will be $550.00	9. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees

00000589561
01/18/07-80021-010 150.00

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	FAINSTEIN, MANNY
STREET ADDRESS	11332 SW 18TH CT
CITY-ST-ZIP	MIRAMAR, FL 33025

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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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: _____ - *PRESIDENT*   **MANNY FAINSTEIN** 01/13/2007 954-367-0989
SIGNATURE AND TYPED/OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #