2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2006
Secretary of State

DOCUMENT# P04000112626

Entity Name: INSURANCE ADVISORS GROUP, INC.

Current Principal Place of Business:

2355 NE OCEAN BOULEVARD
35-B
STUART, FL 349962945 US

New Principal Place of Business:

Current Mailing Address:

2355 NE OCEAN BOULEVARD
35-B
STUART, FL 349962945 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PERCIASEPE, BRIAN
2355 NE OCEAN BLVD
#35-B
STUART, FL 34996 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: D ( ) Delete
Name: PERCIASEPE, BRIAN
Address: 2355 NE OCEAN BOULEVARD # 35-B
City-St-Zip: STUART, FL 349962945 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PERCIASEPE, BRIAN MR
Address: 2355 NE OCEAN BOULEVARD # 35-B
City-St-Zip: STUART, FL 349962945 US

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: BRIAN PERCIASEPE MR 04/04/2006

Electronic Signature of Signing Officer or Director — Date