2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005
Secretary of State

DOCUMENT# P04000139019

Entity Name: 3-2 INSURANCE INC

Current Principal Place of Business:

12516 NW 11 TRAIL
MIAMI, FL 33182

New Principal Place of Business:

Current Mailing Address:

12516 NW 11 TRAIL
MIAMI, FL 33182

New Mailing Address:

FEI Number: 20-1717074 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALAMINO, ROSA
905 NW 106 AVE CIRCLE
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

TERAN, SR, GABRIEL
905 NW 106 AVE CIRCLE
MIAMI, FL 33172 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: GABRIEL TERAN 01/26/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TERAN, GABRIEL
Address: 12516 NW 11 TRAIL
City-St-Zip: MIAMI, FL 33182 US

Title: VP ( ) Delete
Name: TERAN, GABRIEL
Address: 12516 NW 11 TRAIL
City-St-Zip: MIAMI, FL 33182 US

Title: S ( ) Delete
Name: TERAN, GABRIEL
Address: 12516 NW 11 TRAIL
City-St-Zip: MIAMI, FL 33182 US

Title: T ( ) Delete
Name: TERAN, GABRIEL
Address: 12516 NW 11 TRAIL
City-St-Zip: MIAMI, FL 33182 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TERAN, JR, GABRIEL
Address: 12516 NW 11 TRAIL
City-St-Zip: MIAMI, FL 33182 US

Title: VP (X) Change ( ) Addition
Name: TERAN, JR, GABRIEL
Address: 12516 NW 11 TRAIL
City-St-Zip: MIAMI, FL 33182 US

Title: S (X) Change ( ) Addition
Name: TERAN, JR, GABRIEL
Address: 12516 NW 11 TRAIL
City-St-Zip: MIAMI, FL 33182 US

Title: T (X) Change ( ) Addition
Name: TERAN, JR, GABRIEL
Address: 12516 NW 11 TRAIL
City-St-Zip: MIAMI, FL 33182 US

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: GABRIEL TERAN, JR P 01/26/2005
Electronic Signature of Signing Officer or Director Date