

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000140154

FILED
Feb 08, 2006
Secretary of State

Entity Name: EMBASSY INSURANCE CORP.

Current Principal Place of Business:

787 NW 37TH AVE.
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

787 NW 37TH AVE.
MIAMI, FL 33125

New Mailing Address:

FEI Number: 35-2239127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, MABEL
19532 NW 77CT
MIAMI, FL 33015 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: P () Delete
Name: GARCIA, MABEL
Address: 19532 NW 77CT
City-St-Zip: MIAMI, FL 33015

Title: VP () Delete
Name: GARCIA, PLACIDO
Address: 19532 NW 77CT
City-St-Zip: MIAMI, FL 33015

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 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: PLACIDO GARCIA

VP

02/08/2006

Electronic Signature of Signing Officer or Director

Date