2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008
Secretary of State

DOCUMENT# P04000140329

Entity Name: SUPER INSURANCE OF EL MANA, INC.

Current Principal Place of Business:

11362 S.W. 184TH ST.
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

11362 SW 184TH ST
MIAMI, FL 33157

New Mailing Address:

11362 S.W. 184TH ST.
MIAMI, FL 33157

FEI Number: 77-0649665 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROJAS, KADIOLNI
14485 SW 158 PL
MIAMI, FL 33196 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: ROJAS, KADIOLNI
Address: 14485 SW 158 PL
City-St-Zip: MIAMI, FL 33196

Title: VP ( ) Delete
Name: ROJAS, AGUSTIN
Address: 14485 SW 158 PL
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete
Name: GRULLON, CARMEN
Address: 7855 SW 40 ST
City-St-Zip: MIAMI, FL 33155

Title: S ( ) Delete
Name: GONZALEZ, NORAIDA
Address: 14485 SW 158 PL
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: KADIOLNI ROJAS P 01/09/2008

Electronic Signature of Signing Officer or Director — Date