

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000005207

FILED
Jul 12, 2006
Secretary of State

Entity Name: LEGRA INSURANCE AGENCY, INC.

Current Principal Place of Business:

1001 N FEDERAL HWY - STE 233
HALLANDALE, FL 33009

New Principal Place of Business:

323 E. HALLANDALE BEACH BLVD.
HALLANDALE, FL 33009

Current Mailing Address:

1001 N FEDERAL HWY - STE 233
HALLANDALE, FL 33009

New Mailing Address:

323 E. HALLANDALE BEACH BLVD.
HALLANDALE, FL 33009

FEI Number: 20-2151357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGRA, ANA
1825 S OCEAN DR
APT 1007
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

LEGRA, ANA M
2301 S. OCEAN DR.
APT # 208
HOLLYWOOD, FL 33019 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: ANA M. LEGRA

07/12/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEGRA, ANA
Address: 1825 S OCEAN DR - APT 1007
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: BOUDY, CARLOS G
Address: 1825 S OCEAN DR - APT 1007
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEGRA, ANA M
Address: 2301 S. OCEAN DR., APT. # 208
City-St-Zip: HOLLYWOOD, FL 33019

Title: D (X) Change () Addition
Name: BOUDY, CARLOS G
Address: 2301 S. OCEAN DR., APT. # 208
City-St-Zip: HOLLYWOOD, FL 33019

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: ANA M. LEGRA

D

07/12/2006

Electronic Signature of Signing Officer or Director

Date