

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED  
Jan 20, 2012  
Secretary of State

Entity Name: ABSOLUTE INSURANCE BROKERS, INC.

**Current Principal Place of Business:**

351 S CYPRESS ROAD  
SUITE # 402  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

351 S CYPRESS ROAD  
SUITE # 402  
POMPANO BEACH, FL 33060

**New Mailing Address:**

P.O. BOX 1706  
POMPANO BEACH, FL 33061

FEI Number: 54-2168852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCCALL, DEBORAH J PRES  
351 S. CYPRESS ROAD  
SUITE # 402  
POMPANO BEACH, FL 33060 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MCCALL, DEBORAH J  
Address: 351 S CYPRESS ROAD, STE 402  
City-St-Zip: POMPANO BEACH, FL 33060

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH J MCCALL

PRES

01/20/2012

Electronic Signature of Signing Officer or Director

Date