# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Nov 16, 2006**
**Secretary of State**

DOCUMENT# P05000052932

**Entity Name:** JAMERICAN INSURANCE AGENCY INC #2

**Current Principal Place of Business:**

6932 STIRLING RD.
HOLLYWOOD, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

6932 STIRLING RD.
HOLLYWOOD, FL 33024

**New Mailing Address:**

**FEI Number: 35-2251944** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

BEADLE-DESOUSA, JOYCE H
10223 SW 18TH CT
MIRAMAR, FL 33025 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: P ( ) Delete
Name: HENRY, SANDRA M
Address: 2655 PINE TREE DR.
City-St-Zip: MIRAMAR, FL 33023

Title: COOD ( ) Delete
Name: BEADLE-DESOUSA, JOYCE H
Address: 10223 SW 18TH CT
City-St-Zip: MIRAMAR, FL 33025

Title: D (X) Delete
Name: FORTH-BLAKE, JUDITH
Address: 11 BUTTERWICK CT
City-St-Zip: MONTGOMERY VILLAGE, MD 20886

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: FORTH-BLAKE, JUDITH
Address: 9570 NW 42ND CT
City-St-Zip: SUNRISE, FL 33351

Title: MDT (X) Change ( ) Addition
Name: BEADLE-DESOUSA, JOYCE H
Address: 10223 SW 18TH CT
City-St-Zip: MIRAMAR, FL 33025

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: JOYCE BEADLE-DESOUSA MD 11/16/2006

Electronic Signature of Signing Officer or Director Date