2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000052932

Entity Name: JAMERICAN INSURANCE AGENCY INC #2

FILED Dec 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6932 STIRLING RD. HOLLYWOOD, FL 33024

Current Mailing Address: New Mailing Address:

6932 STIRLING RD. HOLLYWOOD, FL 33024

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

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

BEADLE-DESOUSA, JOYCE H LEVY, LORNA M 10223 SW 18TH CT 1101 SW 97TH AVE

MIRAMAR, FL 33025 US PEMBROKE PINES, FL 33025 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: LORNA LEVY 12/10/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 FORTH-BLAKE, JUDITH
 Name:

 Address:
 9570 NW 42ND CT
 Address:

 City-St-Zip:
 SUNRISE, FL 33351
 City-St-Zip:

Title: MDT () Delete Title: D (X) Change () Addition

Name:BEADLE-DESOUSA, JOYCE HName:FULLWOOD, MARCIAAddress:10223 SW 18TH CTAddress:5350 DERBY CHASE CTCity-St-Zip:MIRAMAR, FL 33025City-St-Zip:ALPHARETTA, GA 30005

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: LORNA LEVY RA 12/10/2007