

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056939

FILED
May 01, 2009
Secretary of State

Entity Name: AMERICAN INSURANCE & FINANCE, INC.

Current Principal Place of Business:

8177 W. GLADES ROAD
SUITE 103
BOCA RATON, FL 33434 US

New Principal Place of Business:

Current Mailing Address:

8177 W. GLADES ROAD
SUITE 103
BOCA RATON, FL 33434 US

New Mailing Address:

FEI Number: 20-2878347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROKHOWSKY, GEORGE
8177 W. GLADES ROAD
SUITE 103
BOCA RATON, FL 33434 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GROKHOWKY, GEORGE
Address: 8177 W. GLADES ROAD, SUITE 103
City-St-Zip: BOCA RATON, FL 33434 US

Title: VP () Delete
Name: GROKHOWSKY, MARIBETH
Address: 159 S. E. SAILFISH LANE
City-St-Zip: STUART, FL 34996 US

Title: T () Delete
Name: GROKHOWSKY, NICHOLAS
Address: P.O. BOX 880828
City-St-Zip: BOCA RATON, FL 33488

Title: D () Delete
Name: GROKHOWSKY, ALEXANDER
Address: P.O. BOX 880828
City-St-Zip: BOCA RATON, FL 33488

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: GEORGE GROKHOWSKY

P

05/01/2009

Electronic Signature of Signing Officer or Director

_____ Date