2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000068406

FILED Apr 25, 2006 Secretary of State

Entity Name: PHOENIX INTERNATIONAL INSURANCE SERVICES COMPANY

	rincipal Place	of Business:	New Principal Pl	New Principal Place of Business:	
	ERNATIONAL F FA, FL 34240	LACE SUITE 110			
urrent M	lailing Addres	s:	New Mailing Add	New Mailing Address:	
	ERNATIONAL F FA, FL 34240	LACE SUITE 110			
El Number	: 20-2750355	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
lame and	d Address of C	urrent Registered Agent:	Name and Addre	ss of New Registered Agent:	
313 INTE		LACE SUITE 110 US			
	e named entity s e of Florida.	submits this statement for th	e purpose of changing its regis	stered office or registered agent, or both,	
IGNATU					
	Electron	ic Signature of Registered /	Agent	Date	
ection Ca	mpaign Financing	Trust Fund Contribution ().			
FFICER	S AND DIREC	TORS:	ADDITIONS/CHA	NGES TO OFFICERS AND DIRECTORS	
tle: ame:	ROSS, WILBUF		Title: Name:	() Change () Addition	
	328 EL VEDADO PALM BEACH, I		Address: City-St-Zip:		
ity-St-Zip: tle: ame: ddress:	PALM BEACH, D NEFF, RAYMON	FL 33480 Delete ID M REAM AVE., STE 15E		()Change()Addition	
ity-St-Zip: tle: ame: ddress: ity-St-Zip: tle: ame: ddress:	PALM BEACH, I D () NEFF, RAYMON 1111 GULF STF SARASOTA, FL	FL 33480 Delete ND M REAM AVE., STE 15E 34206 Delete HAEL J NE	City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
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ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip:	PALM BEACH, I D () NEFF, RAYMON 1111 GULF STF SARASOTA, FL D () GIBBONS, MICI 7 TIDEWAY LAI SARASOTA, FL D () ARASKOG, RAI 320 EL VEDADO PALM BEACH, I	Delete ND M REAM AVE., STE 15E 34206 Delete HAEL J NE 34206 Delete HODLPH V D ROAD FL 33480 Delete H R ELD ROAD	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	() Change() Addition	

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.

	Flastrania Cianatura of Cianina Officer or Director		Data
SIGNATURE:	RAYMOND M. NEFF	D	04/25/2006