## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000089052

Address:

City-St-Zip:

Entity Name: A FRESH INSURANCE AGENCY INC

FILED Mar 02, 2007 Secretary of State

Entity Name: A FRESH INSURANCE AGENCY INC.						
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
SUITE A3-	ANDALE BEAC 1 RK, FL 33023	CH BLVD.		5532 PEMBROKE ROAD WEST PARK, FL 33023		
<b>Current M</b>	ailing Address	<b>5:</b>	New Maili	New Mailing Address:		
5713 HALLANDALE BEACH BLVD. SUITE A3-1 WEST PARK, FL 33023				P.O. BOX 4315 HOLLYWOOD, FL 33083		
FEI Number:	20-8085105	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of Co	ırrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
2621 S.W.	IT, GREGORY I 53RD AVE. DOD, FL 33023					
	named entity so of Florida.	ubmits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE: GREGOR	Y L. CHESTNUT				
	Electroni	c Signature of Registered Age	ent	Date		
		(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	ot receive the prior notic	e.		
OFFICERS	S AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DPS ( ) I CHESTNUT, GRI 2621 S.W. 53RD HOLLYWOOD, F	AVE.	Title: Name: Address: City-St-Zip:	(	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DT ()  ALEXANDER, RG 2621 S.W. 53RD HOLLYWOOD, F	AVE.	Title: Name: Address: City-St-Zip:	DS ( STEVENSON 4141 S.W. 25 WEST PARK	5 STREET	
Title: Name: Address: City-St-Zip:	D S ( ) I CHESTNUT, TIM 2230 N.W. 47 AV LAUDERHILL, FI	/E	Title: Name: Address: City-St-Zip:	DT ( STEVENSON 4141S.W. 25 WEST PARK	STREET	
Title: Name:	( )	Delete	Title: Name:	DT (	( ) Change (X) Addition GREGORY L	

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.

Address:

City-St-Zip:

2621 S.W. 53 AVENUE

WEST PARK, FL 33023

SIGNATURE: GREGORY L. CHESTNUT DPS 03/02/2007