

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000103775

FILED  
Mar 06, 2009  
Secretary of State

Entity Name: SOUTH FLORIDA RISK MANAGEMENT I INC.

## Current Principal Place of Business:

2101 W. COMMERCIAL BLVD., SUITE 5100  
FORT LAUDERDALE, FL 33309

## New Principal Place of Business:

39 E PROSPECT RD  
FORT LAUDERDALE, FL 33334

## Current Mailing Address:

2101 W. COMMERCIAL BLVD., SUITE 5100  
FORT LAUDERDALE, FL 33309

## New Mailing Address:

39 E PROSPECT RD  
FORT LAUDERDALE, FL 33334

FEI Number: 56-2582663

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DELILLO, MATTHEW J PRES.  
2101 W COMMERCIAL BLVD #5100  
FORT LAUDERDALE, FL 33309 US

## Name and Address of New Registered Agent:

DELILLO, MATTHEW J PRES.  
39 E PROSPECT RD  
FORT LAUDERDALE, FL 33334 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: MATTHEW DELILLO

03/06/2009

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: MR. ( ) Delete  
Name: DELILLO, MATTHEW J PRESIDE  
Address: 2101 W. COMMERCIAL BLVD., SUITE 5100  
City-St-Zip: FORT LAUDERDALE, FL 33309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change ( ) Addition  
Name: DELILLO, MATTHEW J PRESIDE  
Address: 39 E PROSPECT RD  
City-St-Zip: FORT LAUDERDALE, FL 33334

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: MATTHEW DELILLO

PRES

03/06/2009

Electronic Signature of Signing Officer or Director

Date