

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000149233

FILED
May 01, 2008
Secretary of State

Entity Name: PREFERRED INSURANCE OF FLORIDA, INC.

Current Principal Place of Business:

6151 MIRAMAR PARKWAY
SUITE. #224
MIRAMAR, FL 33023

New Principal Place of Business:

Current Mailing Address:

6151 MIRAMAR PARKWAY
SUITE #224
MIRAMAR, FL 33023

New Mailing Address:

6151 MIRAMAR PARKWAY
SUITE. #224
MIRAMAR, FL 33023

FEI Number: 06-1812062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THELON, SHELNA J
20018 NE 6 CT CIR
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

THELON, SHELNA J
6151 MIRAMAR PKWY
SUITE #224
MIRAMAR, FL 33023 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: SHELNA THELON

05/01/2008

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: THELON, SHELNA J
Address: 20018 NE 6 CT CIR
City-St-Zip: MIAMI, FL 33179 US

Title: VP () Delete
Name: PIERRE LOUIS, WILCHARD
Address: 20018 NE 6 CT CIR
City-St-Zip: MIAMI, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THELON, SHELNA J
Address: 6151 MIRAMAR PKWY SUITE #224
City-St-Zip: MIRAMAR, FL 33023 US

Title: VP (X) Change () Addition
Name: PIERRE LOUIS, WILCHARD
Address: 6151 MIRAMAR PKWY #224
City-St-Zip: MIRAMAR, FL 33023 US

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: SHELNA THELON

P

05/01/2008

Electronic Signature of Signing Officer or Director

Date