

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028964

FILED
Apr 30, 2007
Secretary of State

Entity Name: ASPIRE PUBLIC INSURANCE ADJUSTERS CORP.

Current Principal Place of Business:

11334 S.W. 184 STREET
MIAMI, FLORIDA, 33157

New Principal Place of Business:

11334 S.W. 184 STREET
MIAMI, FL 33157 US

Current Mailing Address:

11334 S.W. 184 STREET
MIAMI, FLORIDA, 33157

New Mailing Address:

11334 S.W. 184 STREET
MIAMI, FL 33157 US

FEI Number: 41-2195030

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEUSTEIN, CHARLES SR.
777 ARTHUR GODFREY RD.
SECOND FLOOR
MIAMI BEACH, FL FLORIDA US

Name and Address of New Registered Agent:

NEUSTEIN, CHARLES SR.
777 ARTHUR GODFREY RD.
SECOND FLOOR
MIAMI BEACH, FL, FL 33140 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: CHARLES NEUSTEIN

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DE JESUS-MONTAS, LUZ D
Address: 11334 S.W. 184 STRET
City-St-Zip: MIAMI, FL 33157 US

Title: VP () Delete
Name: MONTAS, NARCISO H SR.
Address: 11334 S.W. 184 STREET.
City-St-Zip: MIAMI, FL 33157 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LUZ D. DE JESUS-MONTAS

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

Date