2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007
Secretary of State

DOCUMENT# P06000049438

Entity Name: NUSURANCE CORP

Current Principal Place of Business:

410 SOUTH WARE BLVD #619C
TAMPA, FL 33619

New Principal Place of Business:

9280 BAY PLAZA BLVD.
706
TAMPA, FL 33619

Current Mailing Address:

410 SOUTH WARE BLVD #619C
TAMPA, FL 33619

New Mailing Address:

9280 BAY PLAZA BLVD.
706
TAMPA, FL 33619

FEI Number: 20-4642323 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: KAZOR, CHRISTOPHER
Address: 410 SOUTH WARE BLVD #619C
City-St-Zip: TAMPA, FL 33619

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: KAZOR, CHRISTOPHER P
Address: 9280 BAY PLAZA BLVD. STE 706
City-St-Zip: TAMPA, FL 33619

Title: VP ( ) Change (X) Addition
Name: BRUNOFORTE, LOUIS
Address: 10506 SPRING HILL DR.
City-St-Zip: SPRING HILL, FL 34608

Title: D ( ) Change (X) Addition
Name: AMERICAN MARKETING M, ANAGMENT MOTIV A TION SE
Address: 9280 BAY PLAZA BLVD.
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Change (X) Addition
Name: WILLIAM, WELDON G
Address: 2733 NEWMARKET CIR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: D ( ) Change (X) Addition
Name: MIKE, PATRINO
Address: 7607 SOUTHERN BROOK BEND STE 103
City-St-Zip: TAMPA, FL 33635

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.

SIGNATURE: CHRISTOPHER P. KAZOR DPST 04/19/2007

Electronic Signature of Signing Officer or Director — Date