

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000142637

FILED
Feb 07, 2008
Secretary of State

Entity Name: TAMMY INSURANCE AGENCY #3 INC.

Current Principal Place of Business:

11620 SW 40 ST
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

6100 SW 130 AVE
1601
MIAMI, FL 33183

New Mailing Address:

FEI Number: 20-5878586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOLIBIA, ANAELIZ C
6100 SW 130 AVE
1601
MIAMI, FL 33183 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: PTD () Delete
Name: TOLIBIA, ANAELIZ C
Address: 6100 SW 130 AVE 1601
City-St-Zip: MIAMI, FL 33183

Title: SD () Delete
Name: CANSIO, TAMMY
Address: 6100 SW 130 AVE 1601
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: CANSIO, TAMMY
Address: 6100 SW 130 AVE 1601
City-St-Zip: MIAMI, FL 33183

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: ANAELIZ TOLIBIA

P

02/07/2008

Electronic Signature of Signing Officer or Director

Date