

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000010975

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: AGAPE INSURANCE AGENCY CORP

## Current Principal Place of Business:

3905 SW 137 AVE C1  
MIAMI, FL 33175

## New Principal Place of Business:

12595 SW 137 AVE #109-B  
MIAMI, FL 33186

## Current Mailing Address:

3905 SW 137 AVE C1  
MIAMI, FL 33175

## New Mailing Address:

12595 SW 137 AVE #109-B  
MIAMI, FL 33186

FEI Number: 20-8308587

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OLIVA, IVON  
10600 SW 139 ST  
MIAMI, FL 33176 US

## Name and Address of New Registered Agent:

OLIVA, IVON  
11901 SW 132 AVE  
MIAMI, FL 33186 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: IVON OLIVA

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: OLIVA, IVON  
Address: 10600 SW 139 ST  
City-St-Zip: MIAMI, FL 33176

Title: VP ( ) Delete  
Name: ROJAS, KADIOLNI  
Address: 10600 SW 139 ST  
City-St-Zip: MIAMI, FL 33176

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: OLIVA, IVON  
Address: 11901 SW 132 AVE  
City-St-Zip: MIAMI, FL 33186

Title: VP (X) Change ( ) Addition  
Name: OLIVA, IVON  
Address: 11901 SW 132 AV  
City-St-Zip: MIAMI, FL 33186

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: AZAHARYS BAES

CS

04/28/2008

Electronic Signature of Signing Officer or Director

Date