

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000018016

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: PRACTICAL INSURANCE CORP.

## Current Principal Place of Business:

8251 NW 15 STREET  
PEMBROKE PINES, FL 33024 US

## New Principal Place of Business:

2955 SW 8TH STREET  
102  
MIAMI, FL 33135 US

## Current Mailing Address:

8251 NW 15 STREET  
PEMBROKE PINES, FL 33024 US

## New Mailing Address:

FEI Number: 20-8410778      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LUNA, DANIELA A  
8251 NW 15 STREET  
PEMBROKE PINES, FL 33024 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: P ( ) Delete  
Name: LUNA, DANIELA A  
Address: 8251 NW 15 STREET  
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: VP ( ) Delete  
Name: LUNA, MIGUEL J  
Address: 8251 NW 15 STREET  
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: ST ( ) Delete  
Name: LUNA, DANIELA C  
Address: 8251 NW 15 STREET  
City-St-Zip: PEMBROKE PINES, FL 33024 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change ( ) Addition  
Name: NARVAEZ, CARLOS  
Address: 2871 SW 36TH AVE.  
City-St-Zip: MIAMI, FL 33133 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: MIGUEL J. LUNA

VP

04/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date