

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000025164

FILED
May 12, 2008
Secretary of State

Entity Name: PECUNIA INSURANCE SERVICE, INC.

Current Principal Place of Business:

1018 PLAZA DRIVE
KISSIMMEE, FL 34743

New Principal Place of Business:

1637 E VINE ST, SUITE 126
KISSIMMEE, FL 34744

Current Mailing Address:

1018 PLAZA DRIVE
KISSIMMEE, FL 34743

New Mailing Address:

1637 E VINE ST
KISSIMMEE, FL 34743

FEI Number: 20-8509149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PECUNIA, MARCOS R
13206 ASHINGTON POINTE DR
ORLANDO, FL 32824 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: PECUNIA, MARCOS R
Address: 13206 ASHINGTON POINTE DR.
City-St-Zip: ORLANDO, FL 32824

Title: VP () Delete
Name: PECUNIA, DENISE I
Address: 13206 ASHINGTON POINTE DR.
City-St-Zip: ORLANDO, FL 32824

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: MARCOS PECUNIA

P

05/12/2008

Electronic Signature of Signing Officer or Director

Date