2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000045769

Entity Name: DWA INSURANCE GROUP, INC.

FILED Mar 17, 2011 Secretary of State

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iness:	New Principal Place	of Business:	
US			
	New Mailing Address	s:	
US			
ımber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
ature of Registered Age	ent	Date	
	US Imber Applied For () Registered Agent: this statement for the p	US New Mailing Address US Imber Applied For () FEI Number Not Applicable ()	

OFFICERS AND DIRECTORS:

Title:

Name: MARTINEZ, DARIELA
Address: 16345 NW 78 AVENUE
City-St-Zip: MIAMI LAKES, FL 33016

I hereby 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 all other like empowered.

SIGNATURE: DARIELA MARTINEZ P 03/17/2011