2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000045957

Address:

City-St-Zip:

FILED Mar 28, 2008 Secretary of State

Entity Name: ATLANTIC SPECIALTY INSURANCE BROKERS, INC.								
Current Principal Place of Business:				New Principal Place of Business:				
	NGRESS AVE RTH, FL 33461			8996 SE BI HOBE SOL			US	
Current Mailing Address:				New Mailing Address:				
	NGRESS AVE RTH, FL 33461			8996 SE BI HOBE SOL			US	
FEI Number:	26-2277570	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Ce	rtificate of Status Desire	ed ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
BRITOS, FEDERICO A 3952 S. CONGRESS AVE. LAKE WORTH, FL 33461 US				BRITOS, FEDERICO A 8057 STIRRUP CAY CT BOYNTON BEACH, FL 33436 US				
The above in the State		ıbmits this statement for the	purpose o	of changing i	ts registere	d office	e or registered agent,	or both,
SIGNATURE: FEDERICO A BRITOS				03/28/2008				
	Electronic	Signature of Registered Ag	gent				Date	_
Election Carr	npaign Financing	Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	D () E BRITOS, FEDER 3952 S. CONGRI LAKE WORTH, F	ESS AVE.		Title: Name: Address: City-St-Zip:	D BRITOS, FE 8057 STIRF BOYNTON I	EDERICO		
Title: Name: Address: City-St-Zip:	D () E ALBORNOZ, ANT 3952 S. CONGRI LAKE WORTH, F	ESS AVE.		Title: Name: Address: City-St-Zip:	D MCCULLOU 8057 STIRF BOYNTON I	JGH, SAI RUP CAY		
Title: Name:	()	Pelete		Title: Name:	D REFFNER,		ange (X) Addition	

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.

Address:

City-St-Zip:

850 2ND. STREET #317

SANTA MONICA, CA 90403 US

SIGNATURE: FEDERICO A BRITOS D 03/28/2008