2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000084291

MILIAN, HERLING

933A SW 87 AVE

MIAMI, FL 33174

Name:

Address: City-St-Zip:

Entity Name: A+ INSURANCE GROUP COMPANY

FILED May 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14897 SW 175 ST. MIAMI, FL 33187 **Current Mailing Address: New Mailing Address:** 14897 SW 175 ST. MIAMI, FL 33187 FEI Number: 26-0595886 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILIAN, HERLING CARELIS, SABATELA 933A SW 87 AVE 14897 SW 175 ST MIAMI, FL 33174 US US MIAMI, FL 33187 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: CARELIS SABATELA 05/12/2008 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition SABATELA, CARELIS SABATELA, CARELIS Name: Name: 933A SW 87 AVE 14897 SW 175 ST Address: Address: City-St-Zip: MIAMI, FL 33174 City-St-Zip: MIAMI, FL 33187 Title: VΡ (X) Delete Title: () Change () Addition THERMEZY, JENNIFER Name: Name: 933A SW 87 AVE Address: Address: MIAMI, FL 33174 City-St-Zip: City-St-Zip: Title: (X) Delete Title: DIR () Change () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: CARELIS SABATELA P 05/12/2008