

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000088289

FILED
Mar 21, 2008
Secretary of State

Entity Name: IDEAL INSURANCE SOLUTIONS, INC

Current Principal Place of Business:

3333 W COMMERCIAL BLVD,
STE 103
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

3333 W COMMERCIAL BLVD,
STE 103
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 26-0651584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOEL, WOODSIDE
3333 W COMMERCIAL BLVD
STE 105
FORT LAUDERDALE, FL 33309 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: NOEL, WOODSIDE
Address: 3333 W COMMERCIAL BLVD, STE 103
City-St-Zip: FORT LAUDERDALE, FL 333309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WOODSIDE NOEL

P

03/21/2008

Electronic Signature of Signing Officer or Director

Date