

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000125032

Entity Name: EZ INSURANCE GROUP INC

FILED
Jun 06, 2008
Secretary of State

Current Principal Place of Business:

8401 LAKE WORTH RD, SUITE 229
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

8401 LAKE WORTH RD, SUITE 229
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 26-1428976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH, SIMONE V
13399 52ND CT N
WEST PALM BEACH, FL 33411 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DUVALL, KRYSTAL D
Address: 8401 LAKE WORTH RD, SUITE 229
City-St-Zip: LAKE WORTH, FL 33467

Title: VP () Delete
Name: JOSEPH, SIMONE V
Address: 13399 62ND CT N
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOSEPH, SIMONE V
Address: 13399 52ND CT N
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP (X) Change () Addition
Name: DUVALL, KRYSTAL D
Address: 8401 LAKE WORTH RD STE 229
City-St-Zip: LAKE WORTH, FL 33467

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: KRYSTAL DUVALL

VP

06/06/2008

Electronic Signature of Signing Officer or Director

Date