

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000045932

Entity Name: DBS INSURANCE GROUP INC

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

5193 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

6041 JOHNSON STREET
HOLLYWOOD, FL 33024

New Mailing Address:

5193 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328

FEI Number: 26-2564531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEVIGNY, PATRICK
6041 JOHNSON STREET
HOLLYWOOD, FL FL US

Name and Address of New Registered Agent:

BARNHART, CLIFFORD S
5193 S UNIVERSITY DR
DAVIE, FL FL US

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: CLIFFORD S BARNHART

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SEVIGNY, PATRICK
Address: 7508 PEMBROKE RD
City-St-Zip: MIRAMAR, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARNHART, CLIFFORD S
Address: 5193 S UNIVERSITY DR
City-St-Zip: DAVIE, FL 33328

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: CLIFFORD S BARNHART

P

04/07/2009

Electronic Signature of Signing Officer or Director

Date