

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000063094

FILED
Jun 03, 2009
Secretary of State

Entity Name: PREMIUM INSURANCE GROUP CO.

Current Principal Place of Business:

8143 NW 191 STREET
MIAMI GARDEN DRIVE, FL 33015

New Principal Place of Business:

8143 NW 191 STREET
MIAMI GARDENS, FL 33015 US

Current Mailing Address:

8143 NW 191 STREET
MIAMI GARDEN DRIVE, FL 33015

New Mailing Address:

8143 NW 191 STREET
MIAMI GARDENS, FL 33015 US

FEI Number: 94-3484199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDES, FRANCISCO
8143 NW 191 STREET
MIAMI GARDEN DRIVE, FL 33015 US

Name and Address of New Registered Agent:

VALDES, FRANCISCO
8143 NW 191 STREET
MIAMI GARDENS, FL 33015 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: FRANCISCO VALDES

06/03/2009

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:

Title: P () Delete
Name: VALDES, FRANCISCO
Address: 8143 NW 191 STREET
City-St-Zip: MIAMI GARDEN DRIVE, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VALDES, FRANCISCO
Address: 8143 NW 191 STREET
City-St-Zip: MIAMI GARDENS, FL 33015 US

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: FRANCISCO VALDES

P

06/03/2009

Electronic Signature of Signing Officer or Director

Date