

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000034078

FILED
Feb 12, 2011
Secretary of State

Entity Name: LMD INSURANCE GROUP INC.

Current Principal Place of Business:

1450 N.W. 87TH AVENUE
202
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

13238 NW 11 TERRACE
MIAMI, FL 33182

New Mailing Address:

FEI Number: 26-4684668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, AMERICA D MRS.
13238 NW 11 TERRACE
MIAMI, FL 33182 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
Name: LEON, AMERICA D
Address: 13238 NW 11 TERRACE
City-St-Zip: MIAMI, FL 33182 US

Title: OF
Name: LEON, DESIREE
Address: 13238 NW 11 TERRACE
City-St-Zip: MIAMI, FL 33182 US

I hereby 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 all other like empowered.

SIGNATURE: AMERICA LEON

PRES

02/12/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date