

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000074438

FILED
Apr 28, 2011
Secretary of State

Entity Name: 1 KEY INSURANCE SOLUTIONS INC.

Current Principal Place of Business:

1200 NE 125 STREET
NORTH MIAMI, FL 33161

New Principal Place of Business:

13899 BISCAYNE BLVD
SUITE #104
NORTH MIAMI, FL 33181

Current Mailing Address:

1200 NE 125 STREET
NORTH MIAMI, FL 33161

New Mailing Address:

13899 BISCAYNE BLVD
SUITE #104
NORTH MIAMI BEACH, FL 33181

FEI Number: 27-3439155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINARES, LUIS E
1200 NE 125 STREET
NORTH MIAMI, FL 33161 US

Name and Address of New Registered Agent:

SORVILL, CARMEN
13899 BISCAYNE BLVD
SUITE #104
NORTH MIAMI BEACH, FL 33181 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: CARMEN SORVILL

04/28/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: SORVILL, CARMEN
Address: 4391 FOXTAIL LANE
City-St-Zip: WESTON, FL 33331

Title: VP
Name: SORVILL, CARMEN
Address: 4391 FOXTAIL LANE
City-St-Zip: WESTON, FL 33331

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: CARMEN SORVILL

VP

04/28/2011

Electronic Signature of Signing Officer or Director

Date