


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2007 08:00 AM
Secretary of State

DOCUMENT # P93000037022 1. Entity Name UNITED PREMIUM FINANCE COMPANY	
--	---

Principal Place of Business 3903 NE 163RD ST 3RD FLOOR N MIAMI BEACH, FL 33160 US	Mailing Address 3909 NE 163RD ST 3RD FLOOR N MIAMI BEACH, FL 33160 US
--	--



04252007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0423989	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GRIMSLEY, CHARLES J ESQ 3909 NE 163RD ST 3RD FLOOR N. MIAMI BEACH, FL 33160	DO NOT WRITE IN THIS SPACE
---	---------------------------------------

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reissuing) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARRILLO, MICHAEL R 3909 NE 163RD STREET, 3RD FLOOR N MIAMI BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARRILLO, BEAU 3909 NE 163RD ST, 3RD FLOOR N MIAMI BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MC CARTHY, BARBARA 3909 NE 163RD ST, 3RD FLOOR N MIAMI BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARRILLO, RICHARD P JR 3909 NE 163RD ST, 3RD FLOOR N MIAMI BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FERRER, JUAN L 3909 N E 163RD STREET NO. MIAMI BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRIMSLEY, CHARLES J 3909 N E 163RD STREET NO. MIAMI BEACH, FL 33160

U00000753300
05/22/07-80015-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles J. Grimsley **CHARLES J. GRIMSLEY** 4/30/07 (305) 947-4050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #