2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000014436

Entity Name: H.S. SEREN INSURANCE CORP.

FILED Apr 06, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

5300 W. ATLANTIC AVE., SUITE 410
DELRAY BEACH, FL 33484

5300 W. ATLANTIC AVE., SUITE 410
DELRAY BEACH, FL 334848141 US

Current Mailing Address: New Mailing Address:

5300 W. ATLANTIC AVE., SUITE 410

DELRAY BEACH, FL 33484

5300 W. ATLANTIC AVE., SUITE 410

DELRAY BEACH, FL 334848141 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SEREN, STANLEY J SEREN, STANLEY J

5300 W ATLANTIC AVE., STE. 410 5300 W ATLANTIC AVE., STE. 410 DELRAY BEACH, FL 334848141 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: 04/06/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 COHAN, DENNIS
 Name:
 COHAN, DENNIS

 Address:
 3336 RICHMOND AVE #301
 Address:
 5615 KIRBY DR., STE 418

City-St-Zip: HOUSTON, TX 77098 City-St-Zip: HOUSTON, TX 77005

Title: PS () Delete Title: () Change () Addition Name: SEREN. STANLEY J Name:

Address: 5300 W. ATLANTIC AVE., SUITE 410 Address: City-St-Zip: DELRAY BEACH, FL 33484 City-St-Zip:

Name: COHAN, JAYNE Name: COHAN, JAYNE

Address: 3336 ROCHMOND AVE #301 Address: 5615 KIRBY DR., STE 418
City-St-Zip: HOUSTON, TX 77098 City-St-Zip: HOUSTON, TX 77005

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STANLEY J. SEREN PRES 04/06/2005