2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 28, 2005 08:00 AM **DOCUMENT # P94000056385 Secretary of State** 1, Entity Name BLOCKBUSTER INSURANCE CONSULTANTS, INC. Principal Place of Business Mailing Address 2828 NW 17 AVE 22828 NW 17 AVE MIAMI, FL 33142 MIAMI, FL 33142 CR2E034 (10/03) 04252005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0689133 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEEVERS, ISABEL J DO NOT WRITE 2828 NW 17 AVE. MIAMI, FL 33142 __ 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE *U*00000337917 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 04/28/05-80015-002 150.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE BEEVERS, ISABEL NAME STREET ADDRESS 2828 NW 17 AVE MIAMI, FL 33142 CITY-ST-7/P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 empoyered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if of the corporation or the rece changed, or on an attachmen

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