2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000069567

Entity Name: INSURANCE NETWORK CENTER, INC.

FILED Jan 03, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7735 NW 146 ST 7735 NW 146 ST STE 204 STE 204

HIALEAH, FL 33016 MIAMI LAKES, FL 33016 US

Current Mailing Address: New Mailing Address:

7735 NW 146 ST 7735 NW 146 ST

STE 204 STE 204

HIALEAH, FL 33016 US MIAMI LAKES, FL 33016 US

FEI Number: 65-0524536 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DE GONGORA, LUIS D DE GONGORA, LUIS D 7800 NW 161 TERR 7800 NW 161 TERR

HIALEAH, FL 33016 US MIAMI LAKES, FL 33016 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: 01/03/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GONGORA, LUIS D GONGORA, LUIS D Name: Name: Address:

7800 NW 161 TERR Address: 7800 NW 161 TERR City-St-Zip: HIALEAH, FL 33016 City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LUIS DEGONGORA **PRES** 01/03/2008