

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000073250

Entity Name: MGI ASSURANCE CORP.

FILED  
Jan 24, 2012  
Secretary of State

**Current Principal Place of Business:**

12600 SW 120 STREET  
STE 102  
MIAMI, FL 33186 US

**New Principal Place of Business:**

1400 NW 107 AVE  
STE 210  
MIAMI, FL 33172 US

**Current Mailing Address:**

12600 SW 120 STREET  
STE 102  
MIAMI, FL 33186 US

**New Mailing Address:**

1400 NW 107 AVE  
STE 210  
MIAMI, FL 33172 US

FEI Number: 65-0525489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRABARKIEWICZ, MICHAEL  
11226 SW 64TH LN  
MIAMI, FL 33173 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GRABARKIEWICZ, MICHAEL  
Address: 11226 SW 64TH LN  
City-St-Zip: MIAMI, FL 33173

Title: VPS  
Name: GRABARKIEWICZ, MARIELLA H  
Address: 11226 SW 64TH LN  
City-St-Zip: MIAMI, FL 33173

Title: AVP  
Name: VERA, ADRIANA C  
Address: 4637 NW 97 CT.  
City-St-Zip: DORAL, FL 33178

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: MIKE GRABARKIEWICZ

D

01/24/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date