2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000019287

MIAMI, FL 33156

City-St-Zip:

Entity Name: MIER INSURANCE GROUP, INC.

FILED Apr 02, 2008 Secretary of State

Ellilly Nai	ine: MIER IN	SURANCE GROUP, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
6830 SW 7 MIAMI, FL					
Current Mailing Address:			New Mailing Address:		
6830 SW 7 MIAMI, FL					
FEI Number	: 65-0566075	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of (Current Registered Agent:	Name and Address of	New Registered Agent:	
MIER, LUI: 6830 SW 7 MIAMI, FL	133 TERR 33156 US				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	I office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (MIER, LUIS M 6830 SW 133 MIAMI, FL 331		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D (MIER, MIRIAM 6830 SW 133		Title: Name: Address:	() Change () Addition	

City-St-Zip:

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: MIRIAM C. MIER D 04/02/2008