2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 06, 2008
Secretary of State

DOCUMENT# P95000019287

Entity Name: MIER INSURANCE GROUP, INC.

Current Principal Place of Business:

6830 SW 133 TERR
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

6830 SW 133 TERR
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0566075 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MIER, LUIS M
6830 SW 133 TERR
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

MIER, MIRIAM C
6830 SW 133 TERR
MIAMI, FL 33156 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: MIRIAM C. MIER 05/06/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: MIER, LUIS M
Address: 6830 SW 133 TERR
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete
Name: MIER, MIRIAM C
Address: 6830 SW 133 TERR
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MIER, MIRIAM C OWNER
Address: 6830 SW 133 TERR
City-St-Zip: MIAMI, FL 33156

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 05/06/2008
Electronic Signature of Signing Officer or Director Date