

2008 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # P95000026577

1. Entity Name  
GIC UNDERWRITERS, INC.



Principal Place of Business  
4075 SW 83RD AVENUE  
MIAMI, FL 33155

Mailing Address

4075 SW 83RD AVENUE  
MIAMI, FL 33155

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04162008 Chg-P CR2E034 (12/06)

4. FEI Number  
65-0583541

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DIAZ-PADRON, JUAN  
4075 SW 83RD AVE  
MIAMI, FL 33155

7. Name and Address of New Registered Agent

Name **DIAZ-PADRON, JUAN**

Street Address (P.O. Box Number is Not Acceptable)

**4075 S.W. 83 AVE.**

City **MIAMI**

FL Zip Code **33155**

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

Juan Diaz-Padron

4-16-2008

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |   |                                 |  |   |
|--|---|---------------------------------|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P/S<br>PADRON-DIAZ, M. JUAN<br>1528 CANTORIA AVE.<br>CORAL GABLES, FL 33146 | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Juan Diaz-Padron 4-16-08 305-554-0353

FILED  
Apr 30, 2008 8:00 am  
Secretary of State

04-30-2008 90167 020 \*\*\*150.00

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