## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000076357

Entity Name: AZNAREZ INSURANCE AGENCY, INC

FILED May 17, 2007 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10001 SW MIAMI, FL					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
10001 SW MIAMI, FL					
FEI Number	: 65-0612937	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
AZNAREZ 10001 SW MIAMI, FL					
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () AZNAREZ, ATTI 10001 SW 68 S MIAMI, FL 331	T .	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () RIVERO, PETE 10001 SW 68 S		Title: Name: Address:	() Change () Addition	

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: ATTNIET AZNAREZ PRES 05/17/2007