## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000092183

FILED Jan 05, 2006 Secretary of State

Entity Nar	ne: WESTH	OLIDAY INSURANCE, INC.			
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
6905 WES HIALEAH,	T 4TH AVENU FL 33014	JE			
Current M	ailing Addre	ss:	New Mailing Address	New Mailing Address:	
6905 WES HIALEAH,	T 4TH AVENU FL 33014	JE			
FEI Number:	65-0631275	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
SUITE 401	LEJEUNE RO		TEJEDA, JESSICA 6905 WEST 4TH AVEI HIALEAH, FL 33014	6905 WEST 4TH AVENUE	
	named entity e of Florida.	submits this statement for th	e purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JESSICA TEJEDA				01/05/2006	
	Electro	nic Signature of Registered	Agent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TEJEDA, JEŠS 17601 SW 70		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TEJEDA, MAR 17601 SW 70		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JESSICA TEJEDA PR 01/05/2006