

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000096218

FILED  
Sep 08, 2005  
Secretary of State

Entity Name: RESTECH INSURANCE SERVICES, INC.

**Current Principal Place of Business:**

1830 HYPOLUXO RD  
B-126  
LAKE WORTH, FL 33462 US

**New Principal Place of Business:**

**Current Mailing Address:**

1830 HYPOLUXO RD  
B-126  
LAKE WORTH, FL 33462 US

**New Mailing Address:**

FEI Number: 65-0795082      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LABADIE, RANDALL J  
3516 HUDSON LANE  
BOYNTON BEACH, FL 33436 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: LABADIE, RANDALL J  
Address: 3516 HUDSON LN  
City-St-Zip: BOYNTON BEACH, FL 33436

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RANDALL J. LABADIE

PT

09/08/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date