

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000106322

FILED
Feb 28, 2005
Secretary of State

Entity Name: ALWAYS INSURANCE AGENCY, INC.

Current Principal Place of Business:

1117A NE 163 ST
N. MIAMI, FL 33162

New Principal Place of Business:

Current Mailing Address:

1117A NE 163 ST
N. MIAMI, FL 33162

New Mailing Address:

FEI Number: 65-0803521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOSA, CARMEN
1117A NE 163 ST
N. MIAMI, FL 33162 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: CARMEN SOSA

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SOSA, CARMEN
Address: 1117A NE 163 ST
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: MENDEZ, AUDSTIN
Address: 1117 A NE 163 ST
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MENDEZ, AGUSTIN
Address: 1117 A NE 163 ST
City-St-Zip: MIAMI, FL 33162

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: CARMEN SOSA

D

02/28/2005

Electronic Signature of Signing Officer or Director

Date