2005 FOR PROFIT CORPORATION

FILED Apr 15, 2005 08:00 AM Secretary of State ANNUAL REPORT **DOCUMENT # P98000078111** A. J. ALTIERI ADJUSTERS, INC. Principal Place of Business . Mailing Address . . . 4515 LACE CASCADE CT. 4515 LACE CASCADE CT. LUTZ, FL 33558 LUTZ, FL 33558 01072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3533084 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALTIERI, ANDREW J DO NOT WRITE 4515 LACE CASCADE CT. LUTZ, FL 33558 💷 IN THIS SPACE 8. The above rained entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fforida. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ (NOTE: Registered Agent signature required when reinstating) inquation. Typeu or printed cause of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. HICE ALTIERI, ANDREW J NAM! 4515 LACE CASCADE CT." STREET ADDRESS U00000307913 04/15/05-80073-019 150.00 LUTZ, FL 33558 CHY-ST-ZIP HILL NAME STREET ADDRESS 644-51-88 THEF NAME THEELT ADDRESS DO NOT WRITE CITY-ST ZIP IN THIS SPACE duck N4MF STREET ADDRESS City-St 7IP Titlt NAME SHREET ADDRESS COY SUZE

12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under uath, that I am an officer or director of the corporation or the receiver or rightee 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 any address, with all other like empowered.

SIGNATURE:

HILL

STREET ADDRESS CITY-ST-ZIE

SIGNING OFFICER OR DIRECTOR