2006 FOR PROFIT CORPORATION

▼ • ANNUAL REPORT

DOCUMENT # P98000079317

INSURANCE DESIGNS, EDUCATION & SOLUTIONS, INC.



Mailing Address

SIGNATORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Principal Place of Business

SIGNATURE:

FILED Mar 20, 2006 08:00 AM Secretary of State

813-902-0002

SUITE 103 TAMPA, FL 33629	03 SUITE 103				
DO NOT W	RITE IN THIS SPA	ACE	01132006 No 0 4. FEI Number 59-3532833 5. Certificate of Status	<u> </u>	E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
MAURER, KEITH J 3203 BAYSHORE BLVD UNIT 1401 TAMPA, FL 33629	of Current Registered Agent	I office or registe	IN THIS	T WRIT	
SIGNATURE Signature. To Signat	Surface of some is	nstore require	d when reinstating) .00 May Be led to Fees	DATE	
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby cartily that the information suindicated on this report or supplement	upplied with this filling does not qualify for the enter that report is true and accurate and that my sign	xemptions contained ature shall have the s	in Chapter 119, Florida S same legal effect as if mad	Statutes. I further one de under oath; that i	artify that the information arm an officer or director
changed, or on an attachment with an	rustee empowered to execute this report as required and that make an address, with all other like empowered.	uired by Chapter 607	'. Florida Statutes; and tha	i my name appears	in Block 10 or Block 11 if