

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042771

FILED
Feb 14, 2008
Secretary of State

Entity Name: WEST SUNSET INSURANCE, INC.

Current Principal Place of Business:

9425 SUNSET DRIVE, SUITE #237
MIAMI, FL 33173

New Principal Place of Business:

10300 SUNSET DRIVE
470F
MIAMI, FL 33173

Current Mailing Address:

9425 SUNSET DRIVE, SUITE #237
MIAMI, FL 33173

New Mailing Address:

10300 SUNSET DRIVE
470F
MIAMI, FL 33173

FEI Number: 65-0917538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FACENDA, MARIA
14325 S.W. 57 LANE
UNIT # 15
MIAMI, FL 33183 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: VP () Delete
Name: TORO, LILIANA
Address: 19907 N.W. 67TH CIRCLE COURT
City-St-Zip: MIAMI, FL 33015

Title: P () Delete
Name: FACENDA, MARIA
Address: 14325 S.W. 57 LANE # 15
City-St-Zip: MIAMI, FL 33183

Title: VP () Delete
Name: TORO, LILIANA
Address: 19907 N.W. 67TH CIRCLE COURT
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: MARIA FACENDA

PRES

02/14/2008

Electronic Signature of Signing Officer or Director

Date