

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000047131

FILED  
Jul 08, 2005  
Secretary of State

Entity Name: VEINTEMILLA INSURANCE, INC.

## Current Principal Place of Business:

3350 SW 148 AVE SUITE  
110  
MIRAMAR, FL 33027

## New Principal Place of Business:

3350 SW 148 AVE SUITE  
202  
MIRAMAR, FL 33027

## Current Mailing Address:

3350 SW 148 AVE  
110  
MIRAMAR, FL 33027

## New Mailing Address:

3350 SW 148 AVE  
202  
MIRAMAR, FL 33027

FEI Number: 65-0921959

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VEINTEMILLA, WALTER  
4181 SW 188 AVE  
MIRAMAR, FL 33029 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: VEINTEMILLA, WALTER  
Address: 4181 SW 188 AVE  
City-St-Zip: MIRAMAR, FL 33029

## 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: WALTER VEINTEMILLA

CEO

07/08/2005

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

\_\_\_\_\_  
Date