

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000050983

Entity Name: AMSTAR UNDERWRITERS, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

2215 NW 36TH STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

2215 NW 36TH STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 56-2404837

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABBOTT, DALE
2487 COUNTRY OAKS LANE
PALM BEACH GARDENS, FL 33410 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: VD () Delete
Name: DUPUY, EVALDO
Address: 2215 N.W. 36TH ST.
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: BETTELLI, RICHARD
Address: 2215 NW 36TH STREET
City-St-Zip: MIAMI, FL 33142

Title: PD () Delete
Name: GAMWELL, TIM
Address: 2215 N.W. 36TH STREET
City-St-Zip: MIAMI, FL 33142 53

Title: D () Delete
Name: FAERMAN, RICARDO
Address: 4000 PONCE DE LEON BLVD STE 470
City-St-Zip: CORAL GABLES, FL 33146

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:

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: TIM GAMWELL

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date