

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000056745

Entity Name: JEMSTAR INSURANCE AGENCY, INC.

FILED
May 20, 2009
Secretary of State

Current Principal Place of Business:

9795 NW 20 ST
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

PO BOX 450038
SUNRISE, FL 33345

New Mailing Address:

9795 NW 20 ST
CORAL SPRINGS, FL 33071

FEI Number: 65-0929757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GORELICK, JOSHUA
9795 NW 20 ST
CORAL SPRINGS, FL 33071 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: VP () Delete
Name: GORELICK, JOSHUA
Address: 9795 NW 20 ST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: P () Delete
Name: BELLO, MARC
Address: 1422 NW 129 TERR
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOSHUA GORELICK

VP

05/20/2009

Electronic Signature of Signing Officer or Director

Date