FILED
Apr 18, 2008 08:00 AM
Secretary of State

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S07194

1. Entity Name
INTERNATIONAL REINSURANCE, INC.

Principal Place of Business
3100 NORTH OCEAN BLVD
SUITE 2808
FORT LAUDERDALE, FL 33308

Mailing Address
3100 NORTH OCEAN BLVD
SUITE 2808
FORT LAUDERDALE, FL 33308

03252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-1917243
Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DAY, LAURENCE B
3100 OCEAN BLVD
SUITE 2808
FORT LAUDERDALE, FL 33308

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with and accept the obligations of registered agent.

SIGNATURE: _____ Signature (Must be printed name of any person authorized to act on behalf of the registered agent) (MUST be typed or printed name of person signing above) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DAY, LAURENCE B
STREET ADDRESS	3100 OCEAN BLVD., #2808
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/01/08-80049-024 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not conflict with the requirements contained in Chapter 119, Florida Statutes. I further certify that each of the officers indicated on this report or supplemental report is true and accurate and that my signature shall constitute and 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 in Section 10 or Section 11 or is shown as being added, or on an attachment with an address, with all other like empowered officers.

SIGNATURE: _____ 4/14/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date