2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 08:00 AM Secretary of State

DOCUMENT # S99277 1. Entity Name FINANCE & INSURANCE CONSULTANTS OF FLORIDA, INC. Principal Place of Business 4931 ST. CROIX DR TAMPA, FL 33629 TAMPA, FL 33629	Secretary of State
DO NOT WRITE IN THIS SPAC	04282005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For 65-0330037 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent DOMINGUEZ, J.C	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, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees	
After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE DP NAME HARDIN, JOHN W STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33629	Added to Fees
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	05/03/05-80129-001 150.00
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE INAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	
STREET ADDRESS GITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the regeiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: Disconature and typed on Printed Name of Signing Officer on Director Disconature And Typed on Printed Name of Signing Officer on Director	