

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V30887

FILED
Apr 02, 2010
Secretary of State

Entity Name: GABOR INSURANCE SERVICES, INC.

Current Principal Place of Business:

7270 NW 12TH ST
SUITE 700
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

7270 NW 12TH ST
SUITE 700
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 65-0328753 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GABOR, RONALD
7270 NW 12TH ST
STE. 700
MIAMI, FL 33126 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: VPD
Name: GABOR, MICHAEL
Address: 7270 NW 12 STREET SUITE 700
City-St-Zip: MIAMI, FL 33126

Title: PDT
Name: GABOR, RONALD
Address: 7270 NW 12TH ST STE700
City-St-Zip: MIAMI, FL 33126

Title: VPSA
Name: MARTIN, OSCAR
Address: 7270 NW 12TH ST STE700
City-St-Zip: MIAMI, FL 33126

Title: AVP
Name: GONZALEZ, LOURDES
Address: 7270 NW 12TH ST STE 700
City-St-Zip: MIAMI, FL 33126

Title: VP
Name: FINVER, STEVEN
Address: 7270 NW 12TH ST., STE 700
City-St-Zip: MIAMI, FL 33126

Title: VD
Name: KENNEY, ROBERT J
Address: 7270 NW 12 ST STE 700
City-St-Zip: MIAMI, FL 33126

I hereby 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 all other like empowered.

SIGNATURE: RONALD GABOR

PDT

04/02/2010

Electronic Signature of Signing Officer or Director

Date