

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V39618

FILED
Mar 24, 2009
Secretary of State

Entity Name: AMI RISK CONSULTANTS, INC.

Current Principal Place of Business:

11410 N KENDALL DR
STE 208
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

11410N KENDALL DR
STE 208
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0339007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

INGCO, AGUEDO
18236 SW 26TH CT
MIRAMAR, FL 33029 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: P () Delete
Name: INGCO, AGUEDO M PRES.
Address: 18236 SW 26TH CT
City-St-Zip: MIRAMAR, FL 33029

Title: V () Delete
Name: INGCO, CARIDAD B VP
Address: 18236 SW 26TH CT
City-St-Zip: MIRAMAR, FL 33029

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: AGUEDO INGCO

PRES

03/24/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date