No. W 57979		Due no later than Jan 31, 2008			2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. INSURANCE QUOTES USA, LLC SHARON J THOMPSON 800 YAMATO RD STE 100		d. 1423	NATIONAL REGISTERED AGENTS INC 1423 TYRELL LN BOISE ID 83706 3. New Registered Agent Signature:*			
				BOIS				
NO FILING FEE IF		BOCA RATON FL 33431		3. <u>New</u>				
RECEIVED BY DUE DATE								
4. Limited Liability Compar	nies: Enter Na	ames and Addres	ses of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City		State	Country	Postal Code
MANAGER ANDREW SM		SMITH	800 YAMATO RD STE 100	BOCA	RATON	FL	USA	33431
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
FL W 57979		Signature: Andrew Smith			Date: 11/16/2007			
		Name (type or print): Andrew Smith			Title: Manager			
Processed 11/16/2007 * Electronically provided signatures are accepted as original signatures.								