

No. C 127523		Due no later than Feb 29, 2012 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. HMS INSURANCE AGENCY, INC. PO BOX 551540 FT. LAUDERDALE FL 33355-1540		NATIONAL REGISTERED AGENTS INC 1423 TYRELL LANE BOISE ID 83706 USA			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JEFFREY C. WOLK	1625 NW 136TH AVE, SUITE 210	FT. LAUDERDALE	FL	USA	33323	
DIRECTOR	HOWARD L. WOLK	1625 NW 136TH AVE, SUITE 210	FT. LAUDERDALE	FL	USA	33323	
DIRECTOR	SIDNEY D. WOLK	1625 NW 136TH AVE, SUITE 210	FT. LAUDERDALE	FL	USA	33323	
TREASURER	TAMI M. THRAUM	1625 NW 136TH AVE, SUITE 210	FT. LAUDERDALE	FL	USA	33323	
PRESIDENT	DOUG K. STEIN	1625 NW 136TH AVE, SUITE 210	FT. LAUDERDALE	FL	USA	33323	
SECRETARY	TAMI M. THRAUM	1625 NW 136TH AVE, SUITE 210	FT. LAUDERDALE	FL	USA	33323	
5. Organized Under the Laws of: FL C 127523		6. Annual Report must be signed.* Signature: Tami M. Thraum Name (type or print): Tami M. Thraum					
		Date: 02/01/2012 Title: Treasurer					
Processed 02/01/2012		* Electronically provided signatures are accepted as original signatures.					