

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Myrman  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 17 PM 1:42

DOCUMENT # **G63679** (6)

1. Corporation Name  
**LLORELLA INSURANCE, INC.**

Principal Place of Business <b>521 S.W. 12TH AVENUE MIAMI FL 33130-2413</b>	Mailing Address <b>521 S.W. 12TH AVENUE MIAMI FL 33130-2413</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>10/05/1983</b>	3a. Date of Last Report <b>04/12/1994</b>
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number <b>59-2346109</b>	Applied For Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30
9. Name and Address of Current Registered Agent		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
<b>CANAL, JOSE C. ESQ. 1250 N.W. 7TH STREET SUITE 202-205 MIAMI, FLORIDA. 33125</b>		81 Name		
		82 Street Address (P.O. Box Number is Not Acceptable)		
		83		
		84 City	<b>FL</b>	85 Zip Code

11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<b>LLORELLA, ENRIQUE</b> <b>3005 S.W. 78TH AVE.</b> <b>MIAMI, FLORIDA.</b>	11 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>DVT</b>	<del><b>FEJERRELL, SERGIO</b></del> <del><b>3005 S.W. 78TH AVE.</b></del> <del><b>MIAMI, FLORIDA.</b></del>	21 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>SD</b>	<b>LLORELLA, ROSA</b> <b>3005 S.W. 78TH AVE.</b> <b>MIAMI, FLORIDA.</b>	31 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		41 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		51 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		61 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information submitted on this annual report or supplemental annual 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 receiver or trustee empowered to prepare this report as required by Chapter 1007, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or as an alternate, with an asterisk.

SIGNATURE: *Enrique Llorella Pres.* *[Signature]* **1-09-95** **305-336 0175**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR