

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001

APPROVED
AND
FILED

53 MAY 11 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J54886** (3)

BREITBART INSURANCE GROUP, INC.

DO NOT WRITE IN THIS SPACE

Principal Office: Tallahassee, Florida
P O BOX 820870 SOUTH FLORIDA FL 33082-7870
Mailing Address:
P O BOX 820870 SOUTH FLORIDA FL 33082-7870

3. Date of Previous Filing: 02/03/1987
3a. Date of Last Report: 04/11/1994

2. Principal Place of Business:
21. 5800 N. ANDREWS AVE
22. State: FL
23. City: FT. LAUDERDALE
24. Zip: 33310
25. County: BROWARD
26. Mailing Address:
26. P. O. BOX 9328
27. State: FL
28. City: FT LAUDERDALE
29. Zip: 33310
30. County: BROWARD

4. Filing Number: ~~59-2767316~~ 59-2767336
Accepted For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing: \$5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under § 199(1)(c), Florida Statute: Yes No

9. Name and Address of Current Registered Agent
BREITBART, STEVEN
10071 PINES BLVD.
SUITE B
PEMBROOK PINES FL 33024

10. Name and Address of New Registered Agent
81. Name:
82. Street Address: (P.O. Box Number is Not Acceptable)
83. City:
84. City: FT LAUDERDALE FL 85. Zip Code: 33310

11. Pursuant to the provisions of Sections 607.09(2) and 607.15(4), Florida Statutes, the above named corporation submits the 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, thereby, accept the appointment as registered agent. (Print name and address of the officer or director who authorized this change.)

SIGNATURE: *Steven Breitbart* STEVEN BREITBART PRES 4/30/95

12. OFFICERS AND DIRECTORS

TYPE	NAME	STREET ADDRESS	CITY	STATE	ZIP
P	BREITBART, STEVEN	10071 PINES BLVD., SUITE B	PEMBROOK PINES FL		
S	BREITBART, HILDE	11071 PINES BLVD., SUITE B	PEMBROOK PINES FL		

13. ADDITIONAL CHANGES TO OFFICERS, AND/OR DIRECTORS

TYPE	NAME	STREET ADDRESS	CITY	STATE	ZIP
		PO DRAWER 9328 n/a	FT LAUDERDALE FL 33310		
		PO DRAWER 9328 n/a	FT LAUDERDALE FL 33310		

14. I, the undersigned, certify that the information supplied with this filing is true, fully itemized and correct in every respect for the corporation stated in section 119(1)(c) Florida Statutes. I further certify that the information included on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made on the oath. That I am eligible to be a director of this corporation or the person authorized to prepare the report as required by Chapter 607, Florida Statutes, and that my name appears on New 607.09(1)(c) Florida Statute for an annual report filing.

SIGNATURE: *Steven Breitbart* STEVEN BREITBART PRES 4/30/95 (805) 437-771-0360