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Mar 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # M16655 (6)

1. Corporation Name: SPECIALTY PREMIUM FINANCE COMPANY



Principal Place of Business: 8300 WEST FLAGLER STREET SUITE #250 MIAMI FL 33144
Mailing Address: 8300 WEST FLAGLER STREET SUITE #250 MIAMI FL 33144-2096

3. Date Incorporated or Qualified: 06/12/1985
3a. Date of Last Report: 04/11/1996
4. FEI Number: 59-2545785
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent: RICCIARDELLI, JOHN L, 8300 WEST FLAGLER STREET SUITE #250 MIAMI FL 33144

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 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: (NOTE: Registered Agent signature required when reinstating) DATE:

Table with 2 main columns: 12. OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include names, titles, and addresses for John L. Ricciardelli, Debbie Ricciardelli, Denice Borges, Rikki Ricciardelli, Patricia Sanchez, and Jose Garzon.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated 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 execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 3/13/97 SIGNATURE PHONE: 226-0000 EXT 3040

CR2E034 (9/96)