

**FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**FILED**

**May 13 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**DOCUMENT # P95000056917 (4)**

1. Corporation Name  
**ALL CITY BIRD ROAD INSURANCE, INC.**



Principal Place of Business

**8475 SW 40 ST  
MIAMI FL 33173**

Mailing Address

~~8475 SW 40 ST  
MIAMI FL 33173  
XXXXXXXXXX~~

3. Date Incorporated or Qualified  
**07/21/1995**

3a. Date of Last Report  
**05/01/1996**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 **2246 S.W.24 Terrace**

27 Suite, Apt #, etc.

28 **Miami, FL**

29 **33145**

30 Country

4. FEI Number

~~APPLIED FOR~~ **65-0593399**

Applied For

Not Applicable

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  No

9. Name and Address of Current Registered Agent

~~TARBER, JACOB  
9485 SUNSET DR  
A-280  
MIAMI FL 33173~~

10. Name and Address of New Registered Agent

81 Name **Joanna Parker**  
82 Street Address (P.O. Box Number is Not Acceptable) **2246 S. W. 24 Terrace**  
83  
84 City **Miami** **FL** 85 Zip Code **33145**

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 *Joanna Parker*

3/28/97

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> DELETE
DP	<b>BOATWRIGHT, LEONARD JR</b>	<b>15410 SW 84TH AVE</b>	<b>MIAMI FL 33157</b>	<input checked="" type="checkbox"/>
	<b>D/P</b>	<b>E. W. Andich</b>	<b>13325 S. W. 106 Ave.</b>	<input type="checkbox"/>
	<b>D/S/T</b>	<b>Joanna Parker</b>	<b>2246 S. W. 24 Terrace</b>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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 if changed, or on an attachment with an address.

SIGNATURE: *Joanna Parker*

CR2E034 (9/96)