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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPÓRATIONS

POCUMENT # P96000054067 (9)

GREGORY MARINE INSURANCE, INC.

Principal Place of Business	Mailing Address		
3300 NW N. RIVER DR. MIAMI FL 33142	3300 NW N. RIVER DR. MIAMI FL 33142		

FILED May 06 1997 8:00am Secretary of State



Principal Place	of Business	Mailing Add	dross			T CONTINUES ATTA LATING DIVIN DOUGH ONLY ONLY ONLY OF THE ORIEN WINE THE STATE OF T
3300 NW N. RIVE MIAMI FL 33142	ER DR.	3300 NW N. MIAMI FL 33				
						3. Date Incorporated or Qualified 3a. Date of Last Report 06/25/1996
2. Principal Plan	ce of Business	2a. Mailing	Address			4. FEI Number Applied For
21		26				65-06871 6 Not Applicable
Sulte, Apt. #, etc.		Suite, A	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State		´	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	·			Trust Fund Contribution Added to Fees
Zip	Country	Zip	_	Country	′	8. This corporation has liability for intangible tax under s. 199.032,
24	25 9. Name and Address of Cu	29	34	D]		Florida Statutes Yes No
		itent negisteren Ağ		81	Name	10. Name and Address of New Registered Agent
	RBERG, NOEL G				Name	
21510 SW 98TH CT.			82	Street	t Address (P.O. Box Number is Not Acceptable)	
MIAMI	FL 33189			83		
				63		
				84	City	■ 85 Zip Code
44	40 0 000				L	FL
i onice or rec	iisterea aaani or barb in tha S	ialo of Florida, Such	channe was all	horitad bi	ilbo con	d corporation submits this statement for the purpose of changing its registered progration's board of directors. I hereby accept the appointment as registered
agent lam	familiar with, and accept the of	bligations of, Section	607.0505, Florid	da Statute	S.	- Production and an experimental appointment as regional as
SIGNATURE						
12.	gnature, typod or printed name of registered	and fille if applicable AND DIRECTORS	(NO1L: F	legist e red Apo	ant signature	re required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	Abolos ME		DELETE	1.1 1018		PRESIDENT (1) Change Addition
NAME \$	1-9 N-4-	lancez .		1.2 NAME		Now. G. Silberberg
l . []	icia la decidia	£ 0		1.3 STREET	ADDBCCC	1
CITY-ST-ZIP	16-10-01-01-01	(4 0		1.4 CITY- S		ال مسلسم المسلسم
7.7. 5	GERLAND X/1R	top RON	DELETE	2.1 THE	1-71	SELRETARY TREASURER D Change [] Addition
	المارية المارية	Laco		2.2 NAME		Druro . G. Silberbere 8/1/0.
•	HEID COLORED	04-9-		2.3 STREFT	ACADOLOG	D. 10.0 . 3. 3. 1021 061
	41MM1 1233	-		2.3 STREET		MiAny , 4433189
TITLE	11.03	· · · · · · · · · · · · · · · · · · ·	DELETE	31 HILE	51 - 21F	Change Addition
NAME		•		3 2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY-ST-ZIP				3.4. CITY-S		
TITLE		Т	DELETE	4.1 TITLE	21.71	Change Addition
NAME		•		4. 2 NAME		E one go C Tourist
STREET ADDRESS				4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY-S		
TITLE			DETELE	5.1 THLE	1-211	Change Addition
NAME		•	_	5.2 NAME		C. Grange C. Footilott
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP				5.4 CITY-S		
TITLE	",	ľ	DELETE	6.1 TITLE	1°ZIF	Change Addition
NAME				6.2 NAME		Ti orango (ti Addito)
STREET ADDRESS				6.3 STREET	ADDRESS	
CITY-ST-ZIP						
	cartify that the information supp	sliad with this Cline of	and avalled	6.4 CITY - S	r-ZIP	atologic Continues 440 07/0V/V Floring Continues 440 07/0V/V Flori

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 eath; that amount of the corporation or further eceiver 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 chapter 607, or an attachment with an addition.