Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90119 047 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 161958

1. Corporation Name

GEORGE INSURANCE AGENCY, INC.

Principal Place of Business Bill NW 154 ST 120 MIAMI LAKES FL 3016 US 2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. Business 2. Certificate of Status Desired											
MAMI LAKES FL 33016 US DO NOT WRITE IN THIS SPACE	Principal Plac	e of Business	Mailing Addres	ss				s remail train bildt train ibrat grant (bil diate	_,_, 01	/-//	
US DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 06/19/1950	8181 NW 154	ST		MIAMI SHORES FL 33138				DO NOT WRITE IN THIS SPACE			
US 2. Principal Place of Business 2. Amailing Address 2. Principal Place of Business 2. Amailing Address 3. Date Incorporated or Qualified 06/19/1950 4. FEI Number 5-0620318 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 27 City & State City & State City & State City & State 28 City & State City & State 29 Country Zip Country Zip Country B. This corporation owes the current year Intangible Personal Property Tax. Personal Property Tax. Name **AAEMPFER, ROBERT J 1361 NE 104 ST MIAMI SHORES FL 33138 **Batter Address of New Registered Agent 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 office or registored agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE **SIGNATURE** Principal Place of Business In Name **City** **AEMPFER, ROBERT State **OFFICERS AND DIRECTORS** 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. City** **STREET ADDRESS STREET ADD		EL 00040									
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24 25 29 30 Personal Property Tax.	.3	<u> </u>	28					Trust Fund Contribution		Added	o Fees
P. Name and Address of Current Registered Agent KAEMPFER, ROBERT J 1361 NE 104 ST MIAMI SHORES FL 33138 82 Street Address (P.O. Box Number is Not Acceptable) 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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent agentarie required when reinstating) DATE		Country	Zip	-	Coun	try		8. This corporation owes the current year in			.
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CITY-ST-ZIP 14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

ROBERT J. KAEMPFER