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PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business

2426 E ROBINSON ST

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Feb 17 1997 8:00am

Secretary of State

57AHC 01/02/97 (407)894-0447

Secretary of State DIVISION OF CORPORATIONS

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Mailing Address 2426 E ROBINSON ST

P.O. BOX 531064

ALL RISK MANAGEMENT INSURANCE SERVICES, INC.

P.O. BOX 531064 ORLANDO FL 32853-1064 US		P.O. BOX 531064 ORLANDO FL 32853-1064 US		Date Incorporated or Qualified					
					05/16/196	0	04/	23/1996	·
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number				plied For
<u> </u>		26			59-09013	501			t Applicable
- Suite, Apt.⊪ L	#, etc	Suite, Apt. #, etc.		,	5. Certificate of	Status Desired		\$8.75 /	Additional equired
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l	9. Name and Address of Curren	11	1901			ddress of New Re	-		
OTAI			8	Name _				- Ч	
STAHL, LOWELL J 2426 EAST ROBINSON		•	·		STAHL, JEFFREY G.				
	ANDO FL 32803		8:	2 Street Add	ress (P.O. Box Numb E • Robins	per is Not Acceptab	le)		
UMU	MNDO FL 32003	*	8				e generalise		
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Pursuant	to the provisions of Sections 607.050	2 and 607 1508. Florida Sta	tutes the abo	ve-named con	paration submits this	statement for the n	LKOOSS O	changino i	s registered
office or r	egistered agent or both, in the State m familiar with and accept the obligi	of Florida. Such change wa	as authorized t	y the corpora	tion's board of direct	tors. I hereby accer	of the app	ointment as	registered
agent Tai	m familiar with, and accept the obligi	ations of section 37.0505	Florida Statuti	es. 		The second secon	Δι	/02/9	7
GNATURE	Signature type of printed name of registered age	and and title if applicable (OTF: Registered A	neni sianalure renu	ired when reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE	/02/3	
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