

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 433535

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: A A B C INSURANCE AGENCY, INC.

Current Principal Place of Business:

20454 S DIXIE HWY
MIAMI, FL 33189 US

New Principal Place of Business:

6000 PARADISE POINT DRIVE
MIAMI, FL 33157 US

Current Mailing Address:

20454 S DIXIE HWY
MIAMI, FL 33189 US

New Mailing Address:

6000 PARADISE POINT DRIVE
MIAMI, FL 33157 US

FEI Number: 59-1496017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRISH, LAURIE J
20454 S DIXIE HWY
MIAMI, FL 33189 US

Name and Address of New Registered Agent:

LAURIE J PARRISH
6000 PARADISE POINT DRIVE
MIAMI, FL 33157 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LAURIE J PARRISH

04/29/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: PARRISH, LAURIE J,
Address: 20454 S DIXIE HWY
City-St-Zip: MIAMI, FL 33189

Title: V () Delete
Name: JEDLICKA, BARBARA J,
Address: 20454 S DIXIE HWY
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: PARRISH, LAURIE J,
Address: 6000 PARADISE POINT DRIVE
City-St-Zip: MIAMI, FL 33157

Title: V (X) Change () Addition
Name: JEDLICKA, BRADLEY F,
Address: 6000 PARADISE POINT DRIVE
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURIE J PARRISH

PRES

04/29/2002

Electronic Signature of Signing Officer or Director

Date