

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 534521 (0)

1. Corporation Name

ACTUARIAL RESEARCH & DEVELOPMENT CORP.



Principal Place of Business

2140 S. DIXIE HIGHWAY
MIAMI FL 33133

Mailing Address

2140 S. DIXIE HIGHWAY
MIAMI FL 33133

3. Date Incorporated or Qualified
04/07/1977

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1738777

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

10. Name and Address of New Registered Agent

GOLDBERG, MICHAEL C.
8555 PONCE DE LEON RD.
MIAMI FL 33143

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
CBD	GOLDBERG, MICHAEL C.	8555 PONCE DE LEON RD.	MIAMI, FL 00000	<input type="checkbox"/>
VP	MURO, KATHLEEN	407 S.E. 7 ST.	DANIA FL	<input type="checkbox"/>
STD	GOLDBERG, CINDY L	8555 PONCE DE LEON RD.	MIAMI FL	<input type="checkbox"/>
V	STROUD, CHRISTINE	7420 SW 162ND ST	MIAMI FL	<input type="checkbox"/>
EVD	KENNEDY, DOUGLAS	12940 CORONADO TERR.	N MIAMI FL	<input type="checkbox"/>
V	FLEISCHMAN, RICHARD	75 BREAKNECK HILL ROAD	SOUTHBORO MA	<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 checked="" type="checkbox"/> Addition
V	PICK, EDWARD	2417 N. GREENWAY DR.	CORAL GABLES, FL 33134	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V	PRICE, BEVERLY	5600 SW 95 ST.	MIAMI, FL 33156	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	ALVAREZ, CESAR	1221 BRICKELL AVE, 22ND FLOOR	MIAMI, FL 33131	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	NIERENBERG, BRUCE	774 GLENGARRY DR.	MELBOURNE, FL 32940	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	SCHIFF, ALBERT J.	263 TRESSER BLDG, 10TH FLOOR	STAMFORD, CT 06901	<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Michael C. Goldberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

Date

Daytime Phone #

CR2E034 (12/95)