FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY 10 PM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 661325 (1)

1. Corporate Name
U.S. INSURANCE UNDERWRITERS, INC.

Principal Place of Business	Mailing Address
10250 SW 56TH ST SUITE B-102 MIAMI FL 33165-4001	9999 SUNSET DR. #205 MIAMI FL 33173 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/20/1980
3a. Date of Last Report: 06/21/1994
4. FEI Number: 59-1990017 — Applied For / Not Applicable

2. Principal Place of Business: 21 9999 Sunset Drive
22 Suite, Apt #, etc.: 205
23 City & State: Miami, FL
24 Zip: 33173 25 Country: US

2a. Mailing Address: 26
27 Suite, Apt # etc.
28 City & State
29 Zip 30 Country

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.... Florida Statutes. Yes / No

9. Name and Address of Current Registered Agent

MORENO, JULIO C.
1703 S.W. 104TH PLACE
MIAMI FL 33155

10. Name and Address of New Registered Agent
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

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	MORENO, JULIO C.
STREET ADDRESS	1703 S.W. 104TH PLACE
CITY-ST-ZIP	MIAMI FL
TITLE	V
NAME	MORENO, JULIO C. J
STREET ADDRESS	1703 SW 104TH PLACE
CITY-ST-ZIP	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS — Change / Addition

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, 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: [signature] Julio C Moreno 5/05/95 279-4799
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0167482 CP