FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 MAY -1 PM 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995

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

DOCUMENT # 669566 (2)

1. Corporate Name
PETER J. RILLO INSURANCE AGENCY, INC.

Principal Place of Business
4671 UNIVERSITY DR.
C/O PETER J. RILLO
CORAL SPRINGS FL 33067

Mailing Address
4671 UNIVERSITY DR.
C/O PETER J. RILLO
CORAL SPRINGS FL 33067

3. Date of Last Report: 05/09/1980
3a. Date of Last Report: 05/01/1994

2. Date of Incorporation
21
2a. Mailing Address
26

4. FEI Number: 59-2017325
Applied For
Not Applicable

City, State, Zip
22
Suite, Apt. # or
27

5. Certificate of Status Desired
$8.75 Additional Fee Required

City, State
23
City, State
28

6. Florida Campaign Financing Trust Fund Contribution
$5.00 May Be Added to Fees

24 25 29 30

8. Do you want your name and address to be included in the Florida Market Maker Directory?
Yes No

9. Name and Address of Current Registered Agent

RILLO, PETER J.
3300 UNIVERSITY DRIVE
SUITE 602
CORAL SPRINGS FL 33065

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 requirements of Section 607.0505 and/or 607.1908 Florida Statutes, the above named corporation submits the statement of the person or persons designated as registered agent to serve as the registered agent 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 hereby agree to comply with the provisions of Section 607.0505 and/or 607.1908 Florida Statutes.

Signature of Registered Agent

12. OFFICERS AND DIRECTORS

DP
NAME RILLO, PETER J.
3300 UNIVERSITY DR.
CORAL SPRINGS FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

Title
NAME
Street Address
City, State, Zip
Change Addition

14. I hereby certify that the information supplied with this form is accurate and does not exceed, for the corporate income tax year, the authorized shares in effect on the date this annual report or supplemental report is filed and is in compliance with Section 607.0505 and/or 607.1908 Florida Statutes. I further certify that the corporation is in compliance with the requirements of Section 607.0505 and/or 607.1908 Florida Statutes, and that my name appears in Block 12 or Block 13 with an affirmative response within the address.

SIGNATURE: Peter J. Rillo 4-28-95 305-753-8500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #

0110383 CP