FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 2000

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Apr 15 1997 8:00am						
Secretary of State						

EII ED

i. Corporano	MEN 1 # 826303 AK INSURANCE AGENCY, I	(U) INC.				
Principal Place of Business % HOWARD J.BRAFMAN 7900 MIAMI LAKES DRIVE. WEST MIAMI LAKES FL 33016-2897		Mailing Address % HOWARD J.BRAFMAN 7900 MIAMI LAKES DRIVE, WEST MIAMI LAKES FL 33016-5897		1 103101 HOILE 13310 BIIDE (1911 BUIDE 511)	01007 97971 07971 07971 07977 97971 1897	
				3. Date Incorporated or Qualified	3a. Date of Last Report	
2. Principal P	Place of Business	2a. Mailing Address		06/10/1971 4. FEI Number	04/25/1996 Applied For	
21		26		22-1406735	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State	е	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
7ip [24]	Country 25	Z(p)	Country 30	8. This corporation has liability for Florida Statutes 20. Name and Address of New Re	intangible tax under s. 199,032 Yes SILES UNDER	
	g. Name and Address of Curren			10, Name and Address of New Re	gistered Agent -103975	
	FMAN, HOWARD J.		81 Name			
	O MIAMI LAKES DRIVE, WEST		82 Street Ad	dress (P.O. Box Number is Not Acceptab	ole)	
MIA	MI LAKES FL 33016		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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Superation approximate or registered agent and use if applicable. (NOTE: Registered Agent signature required when relinstating) DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
THE	PCO GARLOCK, EMMETT R	☐ DELETE	1.1 TITLE 1.2 NAME	PLEASE SEE EXHIBIT "	Change Addition	
NAME STREET ADDRESS	7900 MIAMI LAKES DR W		1.3 STREET ADDRESS	TOURDE CODE CANIDIT	A ALLACHED	
CHT+ST-7IP	MIAMI LAKES FL 33018		1.4 CITY - ST - ZIP			
THE	SD	DELETE	2.1 TITLE		Change Addition	
NAME	BRAFMAN, HOWARD J.		2 2 NAME			
STREET ADDRESS	7900 MIAMI LAKES DR. W. MIAMI LAKES FL 33016		23 STREET ADDRESS			
CITY: S1:702 TitleE	MINIMI LANCO FL 33010	₩ DELETE	2.4 CITY+ST-ZIP 3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition	
NAME	FLEISCHMAN, DAVID H.		3.2 NAME		money - 1910 Box Sandy 1 Marilland	
STREET ADDRESS	7900 MIAMI LAKES DRIVE WES	ST ·	3.3 STREET ADDRESS			
C-TY - ST - ZIP	MIAMI LAKES FL 33016		3.4. CITY-\$T-ZIP	······································		
TITLE	CD PICTAR IAV I	☐ DELETE	4.1 TITLE		Change L Addition	
NAME STREET ADDRESS	KISLAK, JAY I. 7900 MIAMI LAKES DR. W.		4. 2 NAME 4.3 STREET ADDRESS			
City-St-Zil:	MIAMI LAKES FL 33016		4.3 STREET ADDRESS			
1.115	SVP	K DELETE	51 TITLE		Change Addition	
NAME	DOUGHERTY, JAMES R		5 2 NAME			
STREET ADDRESS	7900 MIAMI LAKES DR. WEST		5.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI LAKES FL 33016 SVP	M DELETE	5.4 CITY-ST-ZIP		☐ Change ☐ Additio	
NAME	CICCARINO, FRANCIS C	At percit	6.1 TITLE 6.2 NAME		C Change C Addition	
STREET ADDRESS	7900 MIAMI LAKES DR. WEST		6.3 STREET ADDRESS			
CHY-ST-ZIP	MIAMI FL 33016		6.4 CITY - ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 off-cer 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:

(305) 364-4213

EXHIBIT "A"

DIRECTORS AND OFFICERS

OF

J. I. KISLAK INSURANCE AGENCY, INC.

NAME	TITLE	ADDRESS
JAY 1. KISLAK	DIRECTOR	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
EMMETT R. GARLOCK	PRESIDENT & CHIEF OPERATING OFFICER	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
THOMAS BARTELMO	SENIOR VICE PRESIDENT	7900 MIAMI LAKES DR WEST MIAMI LAKES, FL 33016
HOWARD J. BRAFMAN	DIRECTOR & SECRETARY	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
CAROL A. FENELLO	VICE PRESIDENT & ASSISTANT SECRETARY	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
JENNIFER GELLER	VICE PRESIDENT	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
DONNA SCHNEIDER	VICE PRESIDENT	1000 ROUTE 9 WOODBRIDGE, NJ 07095
JOAN HILL	ASSISTANT VICE PRESIDENT	7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016
DOUGLAS A. ZASTROW	ASSISTANT SECRETARY & ASSISTANT TREASURER	1000 ROUTE 9 WOODBRIDGE, NJ 07095