

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

APPROVED

10f2

98-99AR

FLORIDA DEPARTMENT OF STATE
CORPORATION
DIVISION OF CORPORATIONS

DOCUMENT # F910000010807

1. Corporation Name

INS SERVICE INC

Principal Place of Business

Mailing Address

IvyBrook Composite Center
1 IvyBrook BLVD - SUITE #140
IVYLAND, PA 18974

2. Principal Place of Business

2a. Mailing Address

21 1 IvyBrook BLVD
Suite, Apt #, etc.
22 SUITE 140
City & State
23 IVYLAND PA
Zip Country
24 18974 25 USA

26 SAME
Suite, Apt #, etc.
27
City & State
28
Zip Country
29
30

9. Name and Address of Current Registered Agent

KNISELY, BENJAMIN
739 ANTALYA CT.
PUNTA GORDA, FL 33950-8001

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

Benjamin Knisely

330-99
DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT
NAME SYDNEY F. MARTIN
STREET ADDRESS C/O CORPORATION
CITY-STATE-ZIP IVYLAND, PA
TITLE VICE-PRESIDENT
NAME MARK KASPER
STREET ADDRESS C/O CORPORATION
CITY-STATE-ZIP IVYLAND, PA
TITLE SECRETARY
NAME DAVID BLANTON
STREET ADDRESS C/O CORPORATION
CITY-STATE-ZIP IVYLAND, PA
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 NAME
15 STREET ADDRESS
16 CITY-STATE-ZIP
21 NAME
22 STREET ADDRESS
23 CITY-STATE-ZIP
31 NAME
32 STREET ADDRESS
33 CITY-STATE-ZIP
41 NAME
42 STREET ADDRESS
43 CITY-STATE-ZIP
51 NAME
52 STREET ADDRESS
53 CITY-STATE-ZIP
61 NAME
62 STREET ADDRESS
63 CITY-STATE-ZIP
71 NAME
72 STREET ADDRESS
73 CITY-STATE-ZIP
81 NAME
82 STREET ADDRESS
83 CITY-STATE-ZIP
91 NAME
92 STREET ADDRESS
93 CITY-STATE-ZIP

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-04/12/99-01128-006
****300.00 ****300.00

David Blanton

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplement, if annual reports are filed, and a certified copy of my signature should be filed with the same. I will not be marked under oath. I am an officer or director of the corporation or the holder of a trust, empowered to execute this report as required by Chapter 607, Florida Statutes, and I hereby declare under oath that Block 12 or Block 13 if changed, or on an attachment with an address, with all other fees empowered.

SIGNATURE: *David Blanton* SECRETARY, 3/15/99 245-675-5110

CR2E034 (11/99)



20f2

March 3, 1999

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ATTENTION: TREVOR BRUMBLEY
P.O. BOX 6327
TALLAHASSEE, FL 32314

RE: APPLICATION FOR REINSTATEMENT

Dear Ms. Trumbley:

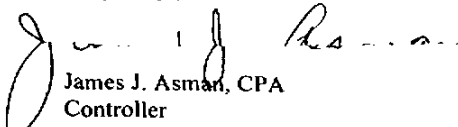
Pursuant to our discussions today, we respectfully request that the \$900. Reinstatement fee for INS Services, Inc. be waived this one time due to extenuating circumstances that caused the Corporation to miss the proper filing date for the 1998 annual renewal. The previous Controller of the Corporation terminated in December, 1997, and the position was vacant until I started approximately April, 1998. In the meantime, most of the Controller's functions, including that of monitoring License and registration renewals, were neglected in many cases, including this situation. As discussed, this situation has been remedied, and should not occur again in the foreseeable future..

In accordance with your instructions, we have enclosed payment for \$300., which covers the renewals for both 1998 (due 5/98) and 1999 (due 5/99). This payment should make us current, and prevent the need for a Dissolution and resulting Reinstatement.

We apologize for our omissions of the past and for any inconvenience caused you

Your kind cooperation and assistance are sincerely appreciated. Please don't hesitate to contact us, if any questions arise, or if you need additional information of any kind.

Very truly yours,



James J. Asman, CPA
Controller

Enclosures - check # 1518

flsvctx/jja

RECEIVED MAR 26 1999