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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name G42910

(1)

FEDERAL AUTO INS., INC.

FILED Apr 22 1996 8:00 am Secretary of State



Principal Place of Business 3564 SO. MILITARY TRAIL LAKE WORTH FL 33463		Mailing Address	Mailing Address 3564 SO. MILITARY TRAIL LAKE WORTH FL 33463		4 saarin aant aleis nana tanat sidit dant diett didtt bildit bildit didtt didt didt didt			
					3. Date incorporated or Qualified 06/09/1983	3a. Date o	f Last F 04/19	
2. Principa! Pl 21	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
Suite, Apt.	# etc	Suito Aol # ata			59-2310568			Not Applicable
22]	#, U.G.	Surte, Apt. #, etc			5. Certificate of Status Desired			Additional Required
City & State	e	Oity & State		- •	6. Election Campaign Financing		\$5.0	0 May Be
23		28			Trust Fund Contribution		Adde	d to Fees
Zip 24	Country 25	Zφ	Country		8. This corporation has liability for		under s	199.032,
24	9. Name and Address of Co	29 Lurrent Registered Agent	30		. 1	i □No		
		- Andrew Agent	81	Name	10. Name and Address of New I	negistered Ag	ent	
VOGEL	HOWARD I.							
	O. MILITARY TRAIL		82	Street Addre	eet Address (P.O. Box Number is Not Acceptable)			
	ORTH FL 33463		83			·		
•			84	Oity		FL	85 Z	p Code
Or regulated	to the provisions of Sections 607, red agent, or both, in the State of ith and accept the obligations of,	TIONSA SOCIEMANDE MAS AND	ONZEO DV ME CORDOR	ned corpora ation's board	ition submits this statement for the pu d of directors. Thereby accept the app		jing its r gistered	egistered office agent. Lam
SIGNATURE								
12.	Styriatus, its pedior permedicants of registers :		(N.11) Bayerer: Agent se	graf art reignirus		CA1E		
TITLE	PSD	S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	· · · · · · · · · · · · · · · · · · ·		
NAME	VOGEL, HOWARD I.	☐ DELETE	1 1 1111.15				Change	Add tion
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CITY - ST - ZIF	LAKE WORTH FL		1.3 STREET AD					
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NAME	VOGEL, ALICIA H.		22 NAME			LI	Change	Addition
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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 number 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.

TYPED OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR