

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

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Apr 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G68499** (4)  
1. Corporation Name  
**FLORIDA STATE DISCOUNT INSURANCE AND AUTO TAGS, INC.**

Principal Place of Business  
**6310 STATE RD. 84  
DAVIE FL 33324**

Mailing Address  
**6310 STATE RD. 84  
DAVIE FL 33324**

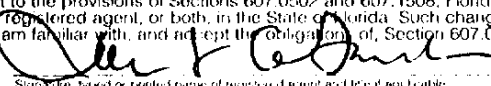


DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>11/09/1983</b>	
21 Suite, Apt #, etc.	22 City & State	26 2107 South Andrews Ave	27 City & State	4. FEI Number <b>59-2342829</b>	Applied For Not Applicable
23 Zip	25 Country	28 333126	29 US	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
LAWSON, EDWARD J. 12731 NW 1ST PLANTATION FL 33325		81 Name Sandler, Robert A.	
		82 Street Address (P.O. Box Number is Not Acceptable) 2107 South Andrews Ave	
		83	
		84 City Ft Lauderdale	
		FL 85 33316	

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE  DATE **3/31/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
1.5 CITY-ST-ZIP	1.6 CITY-ST-ZIP	2.1 TITLE	2.2 NAME
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
2.5 CITY-ST-ZIP	2.6 CITY-ST-ZIP	3.1 TITLE	3.2 NAME
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
3.5 CITY-ST-ZIP	3.6 CITY-ST-ZIP	4.1 TITLE	4.2 NAME
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
4.5 CITY-ST-ZIP	4.6 CITY-ST-ZIP	5.1 TITLE	5.2 NAME
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
5.5 CITY-ST-ZIP	5.6 CITY-ST-ZIP	6.1 TITLE	6.2 NAME
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
6.5 CITY-ST-ZIP	6.6 CITY-ST-ZIP		

14. I 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 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:  DATE **3/31/98**

CR2E034 (10/97)

**FLORIDA STATE DISCOUNT INSURANCE AND AUTO TAGS, INC.**  
**DOCUMENT #G68499**  
**ATTACHMENT**

**Officers & Directors**

- |    |  |    |
|----|--|----|
| 1. | Lawson, Michele V.<br>2107 South Andrews Avenue<br>Ft Lauderdale, FL 33316 | PD |
| 2. | Sandler, Robert A.<br>2107 South Andrews Avenue<br>Ft Lauderdale, FL 33316 | SD |
| 3. | Lawson, Edward J.<br>2107 South Andrews Avenue<br>Ft Lauderdale, FL 33316  | TD |
| 4. | Raymond, Ronald A.<br>2107 South Andrews Avenue<br>Ft Lauderdale, FL 33316 | D  |
| 5. | Kramer, Bruce H.<br>2107 South Andrews Avenue<br>Ft Lauderdale, FL 33316   | D  |
| 6. | Leonard, Carla L.<br>2107 South Andrews Avenue<br>Ft Lauderdale, FL 33316  | D  |
| 7. | Simberg, Bruce F.<br>2107 South Andrews Avenue<br>Ft Lauderdale, FL 33316  | D  |