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

**PROFIT** CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H02208 (7)

**FILED** Feb 23 1998 8:00am Secretary of State

PRIN	SURANCE	E AGENCY, INC.		•							
Principal Plac	e of Busines	s	Mailing Addre	ss				1 1981 BAN BAN BAN BUN BUN 1181 1816 1816 18	FF DERFE MIRKE MEDEL REDE	1 61616 010## 160\$	
1368 SOUTH MILITARY TRAIL WEST PALM BEACH FL 33415  1368 SOUTH MILITARY TRAIL WEST PALM BEACH FL 33415  WEST PALM BEACH FL 33415								DO NOT WRITE	IN THIS SPACE		
								3. Date Incorporated or Qualified			
								05/04/1984			
2. Principal P	lace of Busin	ness	2a. Mailing Ad	2a. Mailing Address				4. FEI Number		Applied For	
21			26	26				59-2423518		Not Applicable	
Suite, Apt. #, etc.			Suite, Apt.	Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional e Required	
City & Stat	Θ Θ		City & State	City & State				6. Election Campaign Financing \$5.00 May Be			
23			28					Trust Fund Contribution Added to Fees			
Zip		Country	Žιρ	<u> </u>	Countr	ý		8. This corporation owes or has pa	•		
24	25 25 Name and Address of Current		[29]	<del></del>		<u> </u>		Personal Property Tax due June 30. Yes I No 10. Name and Address of New Registered Agent			
	<del> </del>		sur Heðisreteo Aðeu	<u> </u>	81	Name		10. Name and Address of New Re	distaled Wdalit		
JACKSON, WILLIAM 1368 S MILITARY TRAIL						Street					
		BEACH FL 33415		l			Address (P.O. Box Number is Not Acceptable)				
YVC		83			<u></u>						
					City			FL 85 Z	Zip Code		
office of ragent. I a SIGNATURE	_	or printed name of registered &						ration submits this statement for the p in's board of directors. I hereby accep swhen reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE		
TITLE	DP			DELETE	1.1 TITLE				Chan	nge 🔲 Addition	
NAME	JACKSC	)n, william e.			1.2 NAME		JK	1ckson, william 2	ر م	1	
STREET ADDRESS		MILITARY TRAIL			1.3 STREE	T ADDRESS	13	68 South Mily TATY	TrAIL		
CITY-ST-ZIP		ALM BEACH FL			1.4 CITY-	ST-ZIP	we	ST, PAIM BRACH, FL.	334/5		
TITLE	VST		L	DELETE	2.1 TITLE		P/V	//S/T	Chan	nge 📙 Addition	
NAME		N, JOANNE			2.2 NAME		1.7	ACKSON, JOANNE	di 181		
STREET ADDRESS		MILITARY TRAIL ALM BEACH FL				T ADDRESS	134	68 South Min /Ary	01000	11 <del>6</del>	
CITY-ST-ZIP TITLE	WEST	ALM DEAUTI PL		DELETE	2. 4 DITY- 3.1 TITLE	ST-ZIP	W *	ST PAIN BRACH, 1		nge	
NAME				UCLETE	3.1 THEE				L. Gilair	ge LI Addition	
STREET ADDRESS						T ADDRESS	1				
CITY-ST-ZIP					3.4. CITY-		1			ľ	
TITLE				DELETE	4.1 TITLE	31-211	<del> </del>	<del></del>	☐ Chan	nge	
NAME					4. 2 NAME						
STREET ADDRESS					•	ADDRESS				ļ	
CITY-ST-ZIP					4.4 CITY-						
TITLE				DELETE	5.1 TITLE				☐ Chan	nge 🔲 Addition	
NAME					5.2 NAME		[				
STREET ADDRESS					5.3 STREE	ADDRESS	1				
CITY-ST-ZIP			·		5.4 CITY - 1	ST-ZIP	<u> </u>				
TITLE				DELETE	6.1 TITLE				☐ Chang	ige 🔲 Addition	
NAME					6.2 NAME		1				
STREET ADDRESS					6.3 STREET	ADDRESS					

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 charged or or an all achment with an address.

2-17-98 (61-864-18/8