


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

FILED  
May 15 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 # H41450 (8)  
1. Corporation Name  
PROGRAM UNDERWRITERS VII, INC.



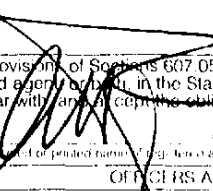
Principal Place of Business 1675 MONTECLAIR ROAD STE. 220 BIRMINGHAM AL 35210 US	Mailing Address C/O LAWRENCE J. BUTO 3700 COCONUT CREEK PARKWAY COCONUT CREEK FL 33066-1616 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 136 N. Moon Avenue Suite, Apt. #, etc. 22 City & State BRANDON, FL 23 Zip 33510 24 Country USA		2a. Mailing Address 25 C/O Arnold Zisselman Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 02/06/1985	
				4. FEI Number 59-2492476	
				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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BUTO, LAWRENCE J. 3700 COCONUT CREEK PARKWAY COCONUT CREEK FL 33066		10. Name and Address of New Registered Agent 81 Name ZISSELMAN, ARNOLD 82 Street Address (P.O. Box Number is Not Acceptable) 3700 COCONUT CREEK PKWAY 83 84 City COCONUT CREEK FL 85 Zip Code 33066	
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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 to be 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  ARNOLD ZISSELMAN (NOTE: Registered Agent signature required when reinstating) DATE 4/23/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME BUTO, LAWRENCE J. STREET ADDRESS 4200 N.W. 101ST DR. CITY-ST-ZIP CORAL SPRINGS FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE DST NAME BUTO, FRANCES T. STREET ADDRESS 4200 N.W. 101ST DR. CITY-ST-ZIP CORAL SPRINGS FL	<input type="checkbox"/> DELETE	2.1 TITLE CST 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP P 33065	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP BUTO, DONNA M. 4200 N.W. 101 DRIVE CORAL SPRINGS, FL 33065	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP VP BUTO, STEPHEN 11184 LAKE VIEW DRIVE CORAL SPRINGS, FL 33071	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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  DONNA M. BUTO 4/23/98 020-9888

CR2E034 (10/97)