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 #

J79357

(6)

B & E INSURANCE AGENCY, INC.

FILED	
Apr 15 1998 8:00am	1
Secretary of State	

Principal Pla	ce of Business	Mailing Address				AIDI! BIBII TITII DIBIF BIBII IODA
% EVERETT KING % EVERETT KING 4877 UNIVERSITY DR. 4677 UNIVERSITY DR. CORAL SPRINGS FL 33067 CORAL SPRINGS FL 33067		067		DO NOT WRITE IN THIS	S SPACE	
					3. Date Incorporated or Qualified 06/22/1987	
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2825619	Not Applicable
Sulte, Apl	t. #, etc.	Suite, Apt. #, etc.			_	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Sta	ite	City & State			6, Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	'	8. This corporation owes or has paid the ci	_ ' _ '
24	25		30		Personal Property Tax due June 30.	L Yes L No
	9, Name and Address of Curren	r Hegistered Agent	81	Name	10. Name and Address of New Registered	Agent
	KING, EVERETT		0,	Name		
	3933 NW 81ST TERRACE		82	Street	Address (P.O. Box Number is Not Acceptable)	
	CORAL SPRINGS FL 33065		83			
			33			
			84	City		85 Zip Code
11 Pureuant	to the provisions of Sections 607.0503	2 and 607 1509. Florida Statutor	s the above	namac	Corporation submits this statement for the purpose	
office or	registered agent, or both, in the State	of Florida. Such change was au	uthorized by	the cor	poration's board of directors. I hereby accept the ap	pointment as registered
•	am familiar with, and accept the obliga	tions of, Section 607.0505, Flor	ida Statutes	3.		
SIGNATURE	Signature, typod or printed name of registered ager	and trio if applicable (NOTE	Registered Ana	ol sionalur	e required when reinstating) DATE	
12.	OFFICERS AND		13.	- C o gridian	ADDITIONS/CHANGES TO OFFICERS AN	ID DIBECTORS IN 12
TITLE	0	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	MARMON, BARBARA		1.2 NAME			
STREET ADDRESS	9517 OLD PINE RD		1.3 STREET	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-S	T- 2 IP		
TITLE	D	DELETE	2.1 TITLE			Change Addition
NAME	KING, BARBARA		2.2 NAME			
STREET ADDRESS	3933 NW 81ST TERRACE		2.3 STREET	ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		2 4 C/TY-S	I - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Vice President King, Everett 3933 NW. 81 St. Terr Coral Springs, Fl. 33065	Change Addition
NAME			3.2 NAME		King, Everett	
STREET ADDRESS			3.3 STREET	ADDRESS	3933 NW 81 5 Terr	
CITY-ST-ZIP			3.4. CITY+S	T-ZIP	Coral Springs, Fl. 33065	
TITLE		L DELETE	4.1 TITLE		, , , ,	Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP		Douete	4.4 CITY - ST	- ZIP		
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME CTREET ADDRESS			5.2 NAME			
STREET ADDRESS	1		5.3 STREET			1
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST 6.1 TITLE	- /12		Change Addition
NAME		print	6.2 NAME			L Change L Audilloll
STREET ADDRESS			6.3 STREET	ADDECC :		
CITY-ST-ZIP						
14. I hereby	L certify that the information supplied wit	h this filing does not qualify for	6.4 CITY-ST the exempt	ion state	L ed in Section 119.07(3)(i), Florida Statutes. I further c	ertify that the information
officer or	ι on inis annual report or subblemental	annual report is true and accur ver or trustee empowered to ex	rate and tha	it mv sia	nature shall have the same legal effect as if made un required by Chapter 607, Florida Statutes; and that	ndaraath∙thatlam an I