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

<u></u>	1000				
1. Corporation	MENT # K2877! DA AUTO INSURANCE OF L	` '			(8)) 8(8)) 8(8)) 828)) 818); 488)
Oringinal Plac	ce of Business	Mailing Address			
_		•			
% richard goldstone 105 East Sunrise BLVD.		% RICHARD GOLDSTONE 105 EAST SUNRISE BLVD.			
	DALE FL 33304	FT. LAUDERDALE FL 3330		DO NOT WRITE IN TH	S SPACE
				 Date Incorporated or Qualified 07/19/1988 	
<u> </u>	Place of Business	28. Mailing Address		4. FEI Number	Applied For
21	# nto	[26]		65-0062084	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	to	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation owes or has paid the	— · — - I
24	25 9. Name and Address of Curren		30	Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
0/		it Registered Agent	81 Name	10. Name and Address of New Registers	o Agenr
GOLDSTONE, RICHARD NORTHRIDGE BANK BLDG. #202					
2300 W. SAMPLE RD.			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
POMPANO BEACH FL 33073			83		······································
			84 City		85 Zip Code
			11'	F	
11. Pursuant	to the provisions of Sections 607,050	2 and 607,1508, Florida Statute of Horida, Such change was a	es, the above-named corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered
agent. I s	am familiar with, and accept the obliga	ations of, Section 607.0505, Flo	rida Statutes.	port o bodie or directors. Thereby docupt the e	ppontition as registeres
SIGNATURE	Signature, typed or printed name of registered age	MOTE AND A STATE OF THE PARTY O	Registered Agent signature raqui	red when reinstating) DATE	
12.	OF LICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	DAGNA, GERALD VAN		1.2 NAME		
STREET ADDRESS	555 N.W. 210TH STREET		1.3 STREET ADDRESS		
. CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	D Dagna, Helen van	DELETE	2.1 TITLE		Change Addition
NAME STREET ADDRESS	555 N.W. 210TH STREET		2.2 NAME 2.3 STREET ADDRESS		.
CITY-ST-ZIP	MIAMI FL		2.3 STREET ADDRESS		ľ
TITLE	D	DELETE	3.1 THILE		Change Addition
NAME	CAFASSO, PATSY		3.2 NAME		
STREET ADDRESS	60 CHATHAM ROAD		3.3 STREET ADDRESS		
CITY-ST-ZIP	HEWLETT NY		3.4. CITY-ST-ZIP		
TITLE	D CATAGOO MADOADET D	DELFTE	4.1 TITLE		Change Addition
NAME	CAFASSO, MARGARET R. 60 CHATHAM ROAD		4. 2 NAME		
STREET ADDRESS	HEWLETT NY		4.3 STREET ADDRESS		\
CITY-ST-ZIP	11617663 5 111	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
	1		- A - AUT BT T-A		

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 altachment with an address.

SIGNATURE:

La Cheminal

(914)263-4080

FILED

Mar 11 1998 8:00am

Secretary of State

2E034 (10/97)