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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # K98935

1. Corporation Name DAVIS MARINE INSURANCE AGENCY, INC.

Mailing Address Principal Place of Business

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90019 040 ***150.00



2. Principal Place of Business	%ROBERT E. DAVIS 12651 S DIXIE HWY MIAMI FL 33156-2955		%ROBERT E. DAVIS 12651 S DIXIE HWY MIAMI FL 33156-2955		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/28/1989			
Suite, Apt. 8, etc. 28 Suite, Apt. 8, etc. 27 27 27 28 3.5. Certificate of Status Desired \$8.15 Additional F68 Required \$5.00 May Be Adde to Force \$5.00 May Be Adde to Force \$5.00 May Be Adde to Force \$1.00 May Be Adde \$1.00 May	2. Princinal Place of Business 2a. Mailing Add			Address		4. FEI Number	· L	
Suite, Apt. 4, etc. 20	2. 1 micipai i id		26	26		59-1057532		
Cry & Slate Cry & Slate C	_	, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		
Zip	City & State		City & State			1	1 1	- 1
9. Name and Address of Current Registered Agent DAVIS, ROBERT E. 12852 S DIXIE HWY MIAMI FL 33156 82 City FL 85 Zip Code 84 City FL 85 Zip Code 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 or familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE DAVIS, ROBERT E. 12852 S DIXIE HWY MAME STREET ADDRESS CITY-ST-2P DAVIS, ROBERT E. 12 NAME 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 TITLE DAVIS, ROBERT E. 12 NAME 13 SIRRET ADDRESS CITY-ST-2P DAVIS, ROBERT E. 21 TITLE 12 NAME 13 SIRRET ADDRESS CITY-ST-2P DAVIS, ROBERT E. 21 TITLE 12 NAME 22 NAME 23 SIRRET ADDRESS CITY-ST-2P DELETE 13 TITLE 14 TITLE 15 DELETE 21 TITLE 22 NAME 23 SIRRET ADDRESS CITY-ST-2P 13 SIRRET ADDRESS CITY-ST-2P 14 TITLE 15 DELETE 21 TITLE 22 NAME 23 SIRRET ADDRESS CITY-ST-2P 15 DELETE 16 DELETE 17 TITLE 17 DELETE 18 SIRRET ADDRESS ACTY-ST-2P CITY-ST-2P CITY-ST-2P CITY-ST-2P 15 SIRRET ADDRESS ACTY-ST-2P 15 SIRRET ADDRESS ACTY-ST-2P 15 SIRRET ADDRESS ACTY-ST-2P 15 SIRRET ADDRESS ACTY-ST-2P CITY-ST-2P CITY-	Zip	_ ′	Zip	·			rent year Intangible	□No
DAVIS, ROBERT E. 12652 S DIXIE HWY MIAMI FL 33156 82 Sirreet Address (P.O. Box Number is Not Acceptable) 83 Fire et Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code FL	24	[25]		,,,,		10. Name and Address of New	Registered Agent	<u> </u>
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 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 office or registered agent, and accept the obligations of, Section 607, Floridas Statutes, before or printed formers of impatement agent and title in appointment. In the signature, topical or impatement agent and title in appointment. In the signature, topical or impatement agent and title in appointment. In the signature, topical or impatement agent and title in appointment. In the signature, topical or impatement agent and title in appointment. In the signature, topical or impatement agent and title in appointment. In the signature, topical or impatement agent and title in appointment as registered of directors. In the acceptance of the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the appointment as registered. In the signature, topical or impatement agent and title in appointment as registered. In the signature, topical or impatement agent and title in appointment as registered. In the signature, topical or impatement agent and title in appointment as registered. In the signature, topical or impatement agent and title in appointment as registered. In the signature, topical or impatement agent and title in appointment as registered. In the signature, topical or in appointment as registered. In the signature, topical or in appointment as registered. In the signature, topical or in appointment as registered. In the signature, topical or in appointment and title in appointment as registered. In the signature, topical or in a		9. Name and Address of Curre	in Registered Agent	81	Name			•
MIAMI FL 33156 B3 B4 City FL B5 Zip Code T1. 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 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 and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of, Section 67,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligations of, Section 67,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligation of, Section 67,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the opporation of decided for the purpose of changing its registered of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of directors. I hereby accept the appointment as registered of change in the purpose			e	82	Street Add			Car Creat Great 17 mg
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17	OLONIATUDE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE: F	Registered Age		ed when reinstating)		TORS IN 12
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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 with all other like empowered.

SIGNATURE:

01/12/99