FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRET... STATE
DIV... CORPORATIONS
95 MAY -1 PM 12:53

DOCUMENT # **M00199** **(3)**

1. Corporation Name
ALL INSURANCE SERVICES, INC.

Principal Place of Business	Mailing Address
3686 W. 12TH AVE. **HIALEAH FL 33012**	**3686 W. 12TH AVE.** **HIALEAH FL 33012**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/03/1984**
3a. Date of Last Report: **07/29/1994**

2. Principal Place of Business (21):
2a. Mailing Address (26):
Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):
City & State (23):
City & State (28):
Zip (24): Country (25): Zip (29): Country (30):

4. FEI Number: **59-2410850** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GARCIA, DULCE
3686 W. 12TH AVE.
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name: MIAMI CORPORATE SYSTEMS, INC.
82 Street Address (P.O. Box Number is Not Acceptable): 5200 Blue Lagoon Drive
83: Suite 700
84 City: Miami FL 85 Zip Code: 33126

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Ramon E. Rasco, President
(Signature, typed or printed name of registered agent and title if applicable) (Title) (New Agent signature required if changing) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	GARCIA, DULCE	12 NAME		
STREET ADDRESS	3205 W. 14TH AVE.	13 STREET ADDRESS		
CITY ST ZIP	HIALEAH FL	14 CITY ST ZIP		
TITLE	STD	21 TITLE		☐ Change ☐ Addition
NAME	ELOY, GARCIA	22 NAME		
STREET ADDRESS	3205 W- 14TH AVE.	23 STREET ADDRESS		
CITY ST ZIP	HIALEAH FL	24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the ... certify that the information indicated on the annual report or supplemental annual report is true and accurate ... oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute the ... appears in Block 12 or Block 13 if changed, or on an attachment with an address ... and in Section 110.07(3)(k), Florida Statutes. I further ... nature shall have the same legal effect as if made under ... ed by Chapter 607, Florida Statutes, and that my name ...

SIGNATURE: DULCE M GARCIA — Dulce M Garcia — 5/16/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Title) (Date)

COVERED OF