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

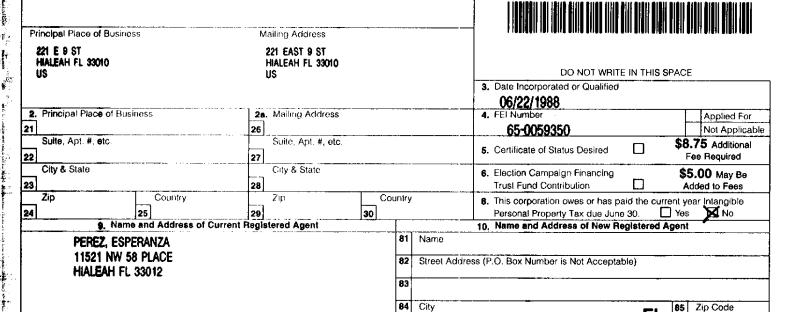
DOCUMENT #

ORANGE INSURANCE SERVICES INC.

M86636

(1)

FILED May 11 1998 8:00am Secretary of State



11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered

agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of rigi tenso agest and file if applicable	(NO!E: Registered Agent signature	e required when reinstaling) DATE		
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DI	IRECTORS	3 IN 12
TITLE	PO DELET	E 11 TITLE		Change	Addition
NAME	GARCIA, GUSTAVO	1.2 NAME			
STREET ADDRESS	11521 NW 58 PLACE	1.3 STREET ADDRESS			
CITY-ST-ZIP	HIALEAH FL	1.4 CiTY - ST - ZIP			
TITLE	☐ DELET	TE 2.1 TITLE		Change	Addition
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS	.,,		ļ
CITY-ST-ZIP		2. 4 CITY - ST - ZIP			
TITLE	☐ DELET	E 3.1 TITLE		Change	☐ Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	☐ DELET	E 4.1 TITLE		Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	☐ DELET	E 5.1 TITLE		Change	☐ Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			ļ
CITY-ST-ZIP		5.4 CITY - ST - ZIP			
TITLE	☐ DELET	E 6.1 TITLE		Change	Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
. 1			1		

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 suppliemental 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 of 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 a fatta himsent with an address.