City & State     City & State     6. Election Campaign Financing Trust Fund Contribution     \$5.00 May Be Added to Fees       23     28     Trust Fund Contribution     Added to Fees       Zip     Country     8. This corporation owes the current year Intangible	COF ANNI	PROFIT RPORATION JAL REPORT <b>1999</b>		Katherin Secretary	TMENT OF STATE The Harris y of State ORPORATIONS	Jan 26 Secre	1LED 5, 1999 8 etary of	State	
ASSURANCE RESEARCH GROUP CORP.  Principal Place of Business OC AITO INSURANCE MARGERS INC. OC A TO INSURANCE MARGERS INC. OC ANTO INSURANCE			9200003	081		01-26-199	99 90044 031 ***1:	50.00	
Principal Place of Business         Malling Address         COULD INSURANCE LIANAGERS INC.           GOD ALTO INSURANCE MANAGERS INC.         GOD ALTO INSURANCE MANAGERS INC.         GOD ALTO INSURANCE MANAGERS INC.           GOD ALTO INSURANCE MANAGERS INC.         GOD ALTO INSURANCE MANAGERS INC.         Jobs Incorporation or GOLINECT           JUDERAILL F1 3331         JUDERAILL F1 3331         Jobs Incorporation or GOLINECT         Applied For           J. Principal Place of Business         Za. Malling Address         4. FEI Number         Incr Applicable           Suite, Apt # etc.         Zi         Suite, Apt #, etc.         S			GROUP CORP.				11 <b>00</b> 711 <b>12</b> 113 88114 88114 8	ININU ALEL OUADE	
Principal Place of Business         Malling Address         COULD INSURANCE LIANAGERS INC.           GOD ALTO INSURANCE MANAGERS INC.         GOD ALTO INSURANCE MANAGERS INC.         GOD ALTO INSURANCE MANAGERS INC.           GOD ALTO INSURANCE MANAGERS INC.         GOD ALTO INSURANCE MANAGERS INC.         Jobs Incorporation or GOLINECT           JUDERAILL F1 3331         JUDERAILL F1 3331         Jobs Incorporation or GOLINECT         Applied For           J. Principal Place of Business         Za. Malling Address         4. FEI Number         Incr Applicable           Suite, Apt # etc.         Zi         Suite, Apt #, etc.         S			-						
2. Proceedings Place of Business         2a. Maing Address         4. FEI Kinner         Applied For         Not Applicable           21         Solite, Apr. #, etc.         20         Solite, Apr. #, etc.         5. Contricute of Status Desired         Fise Required           22         City & State         City & State         City & State         66-04 fiseS5         \$8.75 Additional           20         City & State         City & State         City & State         Control         Addet to Fises           21         City & State         20         Country         8. This corporation eves the current year Integrite         Addet to Fises           23         Country         28         Country         8. This corporation eves the current year Integrite         Not           34         Country         8. This corporation eves the current year Integrite         Not         Not           35         Stote Address of New Registered Agent         10. Name and Address of New Registered Agent         Not           30         Stote Address of New Registered Agent         11. Name         11. Name         12. Stote Address of New Registered Agent           31         Stote Address of New Registered Agent         12. Stote Address of New Registered Agent         12. Stote Address of New Registered Agent           32         Stote Address of New Registere	C/O AUTO INS 4300 N. UNIVEI	urance managers. In Isity dr.	C. C/O 4300	auto insurance ma n. University dr.	NAGERS, INC.	3. Date Incorporated or C		SPACE	
Suite, Apt #, etc.         Suite, Apt #, etc.         Suite, Apt #, etc.         S. Conditional of Status Desired         \$8.75 Additional           Chy & State         City & State         City & State         Etc.         State         Added to Fees         No         No         No         Added to Fees         No         No         Added to Fees         No         No         No         No         No	- ·	lace of Business		failing Address	<u></u>	4. FEI Number	· · · · · · · · · · · · · · · · · · ·		plied For
22       27       City & State       City & State       Election Campaign Financing       True Fund Contribution       Added to Fase         21       20       Country       Zip       Country       Zip       Country       Restore The pressore Theorem Company       Restore Theorem Contribution       Added to Fase         24       23       29       20       Country       21       Country       Restore Theorem Contribution       Added to Fase         24       23       29       29       39       39       Personal Property Tax.       Inance       No         34       700 Country       21       29       39       Name and Address of New Registered Agent       10. Name and Address of New Registered Agent       Inance       No         330 ROYAL PALM WAR       34       City A State       82       Street Address (P.O. Box Number is Not Acceptable)       33         341       Drawant to the provisions of Science 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits this attanement for the purpose of changing its registered       39       Stocd       FL       83       21p Code         343       Orbit is provisions of Science 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits this attanement for the purpose of changing its registered       39       Stocd       21p Code       10		#, etc.		uite, Apt. #, etc.				\$8.75 4	dditional
28     Tost Fund Contribution     Added to Fees       20p     Country     Zip     Country     8. This exponsition owes the current year Intangible Personal Property Tax.     Ives     Ives </td <td></td> <td></td> <td></td> <td>City &amp; State</td> <td><del></del></td> <td></td> <td>``</td> <td></td> <td><u> </u></td>				City & State	<del></del>		``		<u> </u>
28       29       30       Personal Property Tax.       Yes       No         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         30. ROYAL PALM WAY       330 ROYAL PALM WAY       32       Street Address (P.O. Box Number is Not Acceptable)         30. ROYAL PALM WAY       33       30       10. Name and Address of Corden       10. Name and Address (P.O. Box Number is Not Acceptable)         30. ROYAL PALM WAY       33       30       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)         30. ROYAL PALM WAY       30       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)         30. ROYAL PALM WAY       30       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)       10. Name and Address (P.O. Box Number is Not Acceptable)	23		28	***	Country	Trust Fund Contributio	n	Added t	
MURPHY, EUGENE W JR.       91       Name         300 ROYAL PALM WAY       Suffer 100       92       Street Address (P.O. Box Number is Not Acceptable)         31       BEACH FL 33460       83       100       100         32       Street Address (P.O. Box Number is Not Acceptable)       83       100       100         34       Orty       FL       85       20 Code         35       Marine familiar with, and accept the obligations of Socian 607 0505. Florida Statutes.       More Eventset Agent statutes.       More Eventset Agent statutes.         SIGNATURE       V       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         The       V       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         The       V       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         The       V       OFFICERS AND DIRECTORS       13.       ADITIONS/CHANGES TO OFFICERS AND DIREC		<b>—</b> · ·		·				<u> </u>	No`
BURPHY, ELIGENE W.R.           Support         SUBJECT F0           PALM BEACH FL 33460         5           44         City         FL           53         Corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 607.0502 and 607.1508, Florida Statutes.           SIGNATURE         Support on the State of Florida, Statute agent and accept the obligations of, Section 607.0505, Florida Statutes.           SIGNATURE         OFFICERS AND DIRECTORS         13.           ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.         DATE           12.         OFFICERS AND DIRECTORS         13.           ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.         DATE           13.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.           TITLE         V         DELETE         11 mute           STREET ADDRESS         Change         Addition           STREET ADDRESS         33 meter ADDRESS         Change         Addition           NAME         23 STREET ADDRESS         Change         Addition           STREET ADDRESS         33 STREET ADDRESS         Change         Addition           STREET ADDRESS         33 STREET ADDRESS <td>- I</td> <td></td> <td></td> <td></td> <td>81 Name</td> <td>10. Name and Address of</td> <td>of New Registered</td> <td>Agent</td> <td></td>	- I				81 Name	10. Name and Address of	of New Registered	Agent	
12.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         TITLE       V       DELETE       11 TITLE       Change       Addition         STRET ADDRESS       SG48 N.W. 7TH CIRCLE       13 STRET ADDRESS       Change       Addition         TITLE       DELETE       21 NAME       13 STRET ADDRESS       Change       Addition         STRET ADDRESS       PLANTATION FL 33351       14 CTY-ST-2P       Change       Addition         TITLE       DELETE       21 STRET ADDRESS       Change       Addition         STRET ADDRESS       Change       Addition       Change       Addition         STRET ADDRESS       DELETE       21 STRET ADDRESS       Change       Addition         STRET ADDRESS       Change       Addition       22 NAME       23 STRET ADDRESS       Change       Addition         STRET ADDRESS       STRET ADDRESS       STRET ADDRESS       Change       Addition         STRET ADDRESS       Street ADDRESS       Street ADDRESS       Change       Addition         STRET ADDRESS       Street ADDRESS       Street ADDRESS       Change       Addition         STRET ADDRESS       Street ADDRESS       Street ADDRESS       Change       Addition <t< th=""><th></th><th>· · ·</th><th></th><th></th><th>ISAL City</th><th>(</th><th></th><th>1851 2004</th><th></th></t<>		· · ·			ISAL City	(		1851 2004	
IIILE     V     IIILE     IIIILE     IIIIILE     IIIILE     IIIIILE     IIIIIILE     IIIIIILE     IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	agent. I a	egistered agent, or both im familiar with, and acc	n, in the State of Florida cept the obligations of, S	Such change was au ection 607.0505, Flor	es, the above-named cor uthorized by the corporat ida Statutes.	tion's board of directors. I herei	by accept the appoint	changing its	registered gistered
TITLE       DELETE       21 TITLE       Change       Addition         NAME       22 NAME       23 STREET ADDRESS       23 STREET ADDRESS         CITY-ST-ZP       Change       Addition         TITLE       DELETE       31 TITLE       Change       Addition         NAME       DELETE       31 TITLE       Change       Addition         NAME       STREET ADDRESS       33 STREET ADDRESS       Addition         STREET ADDRESS       STREET ADDRESS       Change       Addition         NAME       DELETE       31 TITLE       Change       Addition         NAME       STREET ADDRESS       STREET ADDRESS       CTY-ST-ZP       Change       Addition         NAME       DELETE       41 TITLE       Addition       Addition       Addition       Addition         NAME       STREET ADDRESS       STREET ADDRESS       STREET ADDRESS       Addition       Addition         NAME	SIGNATURE	egistered agent, or both m familiar with, and acc Signature, typed or printed nam	n, in the State of Florida cept the obligations of, S e of registered agent and title if a	Such change was au ection 607.0505, Flor pplicable. (NOTE: TORS	es, the above-named cor thorized by the corporat ida Statutes. Registered Agent signature require 13.	ned when reinstating) / 3332/ ADDITIONS/CHANGES		changing its ntment as reg	registered gistered
City-st-zip       2.4 City-st-zip         ITILE       DELETE       3.1 TITLE         NAME       OPELETE       4.1 TITLE         NAME       OPELETE       5.1 TITLE         NAME       STREET ADDRESS       City Strate         City Strate       STREET ADDRESS       City Strate         City S	SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or bott Signature, typed or printed name V SCATURRO, JOSE 9648 N.W. 7TH CI	n, in the State of Florida. Sept the obligations of, S e of registered agent and title if a OFFICERS AND DIREC PH RCLE	Such change was au ection 607.0505, Flor pplicable. (NOTE: TORS	es, the above-named con- thorized by the corporat ida Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ned when reinstating) / 3332/ ADDITIONS/CHANGES		changing its ntment as reg	RS IN 12
CITY-ST-ZIP     34. CITY-ST-ZIP       CITY-ST-ZIP     DELETE       ANNE     4.1 TITLE       NAME     4.2 NAME       STREET ADDRESS     4.4 CITY-ST-ZIP       CITY-ST-ZIP     1.2 COS       TITLE     DELETE       STREET ADDRESS     4.4 CITY-ST-ZIP       CITY-ST-ZIP     1.2 COS       STREET ADDRESS     4.4 CITY-ST-ZIP       CITY-ST-ZIP     1.2 COS       STREET ADDRESS     4.4 CITY-ST-ZIP       CITY-ST-ZIP     1.2 COS       STREET ADDRESS     5.1 TITLE       STREET ADDRESS     5.3 STREET ADDRESS       CITY-ST-ZIP     5.3 STREET ADDRESS       CITY-ST-ZIP     5.4 CITY-ST-ZIP       STREET ADDRESS     5.4 CITY-ST-ZIP       STREET ADDRESS     5.4 CITY-ST-ZIP       STREET ADDRESS     6.1 TITLE       OCASE SC V/ 7143 GAOL     6.2 NAME       NAME     9.0 ELETE       NAME     9.0 ELETE       NAME     9.0 ELETE	ICCC Office of SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or bott Signature, typed or printed name V SCATURRO, JOSE 9648 N.W. 7TH CI	n, in the State of Florida. Sept the obligations of, S e of registered agent and title if a OFFICERS AND DIREC PH RCLE	Such change was au ection.607.0505, Flor pplicable. (NOTE: TORS	as, the above-named corr ithorized by the corporat ida Statutes.  Registered Agent signature requir 13.  1.1 ITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME	ned when reinstating) / 3332/ ADDITIONS/CHANGES		Changing its ntment as req ID DIRECTO	RS IN 12
Intel     Intel     Intel       NAME     4.2 NAME       STREET ADDRESS     4.4 CITY-ST-ZIP       Intel     Intel       Intel     Intel <td>ITTLE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE</td> <td>egistered agent, or bott Signature, typed or printed name V SCATURRO, JOSE 9648 N.W. 7TH CI</td> <td>n, in the State of Florida. Sept the obligations of, S e of registered agent and title if a OFFICERS AND DIREC PH RCLE</td> <td>Such change was au ection.607.0505, Flor pplicable. (NOTE: TORS DELETE</td> <td>s, the above-named contributized by the corporation ida Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE</td> <td>ned when reinstating) / 3332/ ADDITIONS/CHANGES</td> <td></td> <td>changing its ntment as reg</td> <td>RS IN 12 Addition</td>	ITTLE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or bott Signature, typed or printed name V SCATURRO, JOSE 9648 N.W. 7TH CI	n, in the State of Florida. Sept the obligations of, S e of registered agent and title if a OFFICERS AND DIREC PH RCLE	Such change was au ection.607.0505, Flor pplicable. (NOTE: TORS DELETE	s, the above-named contributized by the corporation ida Statutes. Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ned when reinstating) / 3332/ ADDITIONS/CHANGES		changing its ntment as reg	RS IN 12 Addition
Off Of Late     Image     DELETE     5.1 TITLE     Image     Addition       NAME     52 NAME     1/05/100/2     53 STREET ADDRESS     53 STREET ADDRESS       STREET ADDRESS     54 CITY-ST-ZIP     54 CITY-ST-ZIP     54 CITY-ST-ZIP       TITLE     00/45/05/40/05/05/05/05/05/05/05/05/05/05/05/05/05	SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or bott Signature, typed or printed nem C V SCATURRO, JOSE 9648 N.W. 7TH CII PLANTATION FL 3:	n, in the State of Florida. Sept the obligations of, S e of registered agent and title if a OFFICERS AND DIREC PH RCLE	Such change was au ection.607.0505, Flor pplicable. (NOTE: TORS DELETE	s, the above-named con thorized by the corporat ida Statutes. Registered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	ned when reinstating) / 3332/ ADDITIONS/CHANGES	DATE TO OFFICERS AN	changing its ntment as reg	RS IN 12 Addition
Of Point         Of Point         Delete         6.1 TITLE         □ Change         □ Addition           TITLE         06.48 (0.17)         214 (0.62)         6.2 NAME         6.2 NAME         6.2 NAME           NAME         PP April A (0.82)         6.2 NAME         6.3 STORES         6.3 STORES         6.3 STORES	SIGNATURE SIGNATURE 12. IITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or bott im familiar with, and acc Signature, typed or printed nam SCATURRO, JOSE 9648 N.W. 7TH CIE PLANTATION FL 3	h, in the State of Florida. Sept the obligations of, S e of registered agent and title if a DFFICERS AND DIREC PH RCLE 3351	Such change was au ection.607.0505, Flor pplicable. (NOTE: TORS DELETE	IS, the above-named cor thorized by the corporat ida Statutes. Régistered Agent signature requir 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ned when reinstating) / 3332/ ADDITIONS/CHANGES	DATE TO OFFICERS AN	changing its ntment as reg DDIRECTO Change	RS IN 12 Addition
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CITY-ST-ZIP  6.4 CITY-ST-ZIP  1. 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	SIGNATURE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistereid agent, or bott Signature, typed or printed nem C V SCATURRO, JOSE 9648 N.W. 7TH CII 9648 N.W. 7TH CII PLANTATION FL 33 PLANTATION FL 34 PLANTATION FL 34	h, in the State of Florida. Sept the obligations of, S e of registered agent and title if a DFFICERS AND DIREC PH RCLE 3351 C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.	Such change was au ection.607.0505, Flor pplicable. (NOTE: TORS DELETE	Image: start of the start	tion's board of directors. I herei red when roinstating)/ ADDITIONS/CHANGES Co. 24 18935 20 24 18955 20 24 189555 20 24 18955 20 24 189555 20 24 189555 20 24 189555 20 24 18955	DATE TO OFFICERS AN	changing its ntment as req ID DIRECTO Change	RS IN 12 Addition

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