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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P9300006819 (5)

RELIANCE ADJUSTERS, INC.

FILED Mar 26 1997 8:00am Secretary of State



Principal Plane of Susiness 10111 SW 134TH PL MIAMI FL 33186 US		Mailing Address 10111 SW 134TH PLACE MIAMI FL 33188-2821 US			L TOFINGEL ING 10100 LITER BEING BONN BONN BONN BRING BRING BUINT IDNOT HER WINN HOUR				
						3. Date Incorporated or Qualified 01/25/1993		te of Last F)5/1996	Report
2. Frincipal f 1	Place of Business	28. Mailing Address 26			4. FEI Number 65-0397003			pplied For ot Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc			5. Certificate of Status Desired			\$8.75 Additional Fee Required	
City & Sto	ite	City & State			Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees	
Zipi 4.	Country 25	Ζφ 29	30 Co	untry			Yes 💆] No	s. 199.032,
	 Name and Address of Curr ARTINEZ, OSCAR G JR 	rent Hegistered Agent		81	Name	10. Name and Address of New Rec	JISTOPO A	gent	
	111 SW 134TH PL					_			
	AMI FL 33186		82 Street Ad		Street Add	ress (P.O. Box Number is Not Acceptable	e)		
	, -			83					
				84	City			85 Zip	Code
11. Pursuant	It to the provisions of Sections 607.0	502 and 607.1508. Florida S	tatutes, the a	above	-named corr	poration submits this statement for the pution's board of directors. I hereby accep	FL urpose of	changing i	ts registere
SIGNATURE	am familian with, and accept the ob-					ired when reinstating)	DATE		
12. The	OFFICERS A	AND DIRECTORS DELETE	13. 1.1			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR Change	RS IN 12
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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 have a 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 have a report of this corporation or fire 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 12 or Block 12 or Block 13 or on an attachment with an additional statutes.

SIGNATURE:

DIRECTOR