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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000034003 (2)

FILED Jan 15 1998 8:00am Secretary of State

DIVERSIFIED INSURANCE GROUP, INC. Principal Place of Business Mailing Address 23100 SOUTHWEST 142ND AVENUE 23100 SOUTHWEST 142ND AVENUE MIAMI FL 33170 MIAMI FL 33170 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/10/1993 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 21 65-0414053 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional \Box 5. Cortificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Bo 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent STRA45 STRAUS, JUDD L 4-470 23100 S.W. 142ND AVE. 82 Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33170 83 84 City 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 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, typod or poilled haine of registered agent and life if applicable (NOTE: Registered Agent signature required when relistating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition THUE 1.1 TITLE STRAUS, JUDD NAM 1.2 NAME 23100 SOUTHWEST 142ND AVENUE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33170 CITY-ST-ZIP 1.4 City - St - 7/P DELETE THILE 2.1 TITLE Change Addition STRAUS, MARY JO NAME 2.2 NAME 23100 SOUTHWEST 142ND AVENUE STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33170** CITY-ST-ZIP 2 4 City-St-ZiP DELETE Change Addition THUE 3.1 1111 € NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. C(1) - ST - ZIP CITY-S1-ZIF DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.9 STREET ADDRESS CITY-ST-ZIF 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP DELETE. Addition Change THE **6.1 TITLE** 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information indicated on this annual report for supplier or that the information indicated on this annual report for supplier or that report for the corporation of the corporat

SIGNATURE:

JUAD STRAUS

1/6/98

705-257-2434