FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT



CORPORA' ANNUAL RE 1996	TION PORT	Sand Sec	ratary of State OF CORPORATIONS		
DOCUMEN 1. Corporation Name	т# Р93 <i>00</i> 0	037414			
BIANCO I	NSURANCE ASS	ociates INC			
Principal Place of Busine	ess	Mailing Address			
1460 E. 4th Hialeat, FL		1460 E. 4th Hì AIEAH, A.		3. Date incorporated or Qualifie 05/24/ 1993	d 38. Date of Last Report 1995
2. Principal Place of Bu	usiness	2a. Mailing Address		4. FEI Number 65 0432378	Applied For Not Applicable
Suite, Apl. #, etc.		Suite, Apt. #, etc.	_ ,	5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & Stale		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z ₁ p	Country	Ζιρ 29	Country 30	8. This corporation has liability f	for intangible tax under sil 199.032, Yesi □ No
	25 ame and Address of Current			10. Name and Address of Nev	w Registered Agent
			81 Name		
MARIA E.	VILA		82 Stree	et Address (P.O. Box Number is Not Accep	etable)
1460 E. 4	46 AVE.		83		
HIAIEAH ,	FL. 33010		84 City		85 Zip Code
				any entire substitic the statement for the	purpose of changing its registered office
	rovisions of Sections 607.0502 it, or both, in the State of Florid accept the obligations of Section			corporation submits this statement for the is board of directors. I hereby accept the a	appointment as registered agent. Lam
SIGNATURE	types of protect rank of earliest contract	and the filter to the	- Harde Berjich in LAbert's beiter	renegorial what incredency	(iAT:
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTORS IN 12
TILE P/D		DELETE	1 1 TH, F		Change Add tion
NAME MAR	ZIA E. VILA	البدم 🗠	1.2 NAME		
STREET ADDRESS 7015	MIAMI LAKES	DK 1014	1.3 SERFEL ADDRES	22.	
	ami LAKES, FL.	33014	2 1 IULE		Change Addition
TITLE			2 2 NAM		
NAME STREET ADDRESS			2.3 STREET ADDRES	s	
CITY-ST-ZIP			2.4 CiTY - ST - ZiP		
TITLE		DELETE	3 · HILE		Change Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STHEET ADDRE	38	
CHY-ST-ZIP		DELETE	3.4 CHY+\$1-7IP 4.1 TIPLE		Change Addition
TITLE			4 2 NAME		- · -
NAME OXOCK LANDRESS			4.3 STREET ADDRES	55	
STREET ADORESS			4.4.0.11Y ST-ZIP	900001! -05/17/961 ***225.00	525113 0017027
CITY - ST - ZIP TITLE		DELFIE		-05/11/36(Crange Addition
NAME			5.2 NAME	****∠∠⊃.⊍U	
STREET ADDRESS			5.3 STHEET ADDRE	ss	
City - ST - 7/F			5.4 Cify - \$T - 7/P		

6.4 CITY - ST-2IP 14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 officer or director of the corporation or 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 an attachment with an address

6 1 TillE

6.2 NAMÉ

6.3 STHEET ACORESS

SIGNATURE: _

CITY - ST - ZIF

STREET ADDRESS

TITLE

NAME

DELETE

305 PRY UT 2 V

Control Process 4-96

Change

☐ Addition

CR2E034 (12/95)