FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000047942 (6) AMERICAN UNDERWRITERS AGENCY OF FLORIDA, INC.

rincipal Place of Business	Mailing Address
9501 N.W. 27TH AVENUE	9501 N.W. 27TH AVENUE
MAMI FL 33147	MIAMI FL 33147

FILED Apr 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0458545 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERTIG, JACK 9501 N.W. 27TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33147** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.01.02 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature requ

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE 11 TIME Change Addition TITLE FERTIG, JACK NAME 1.2 NAME CR2E034 9501 N.W. 27TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33147 1.4 CITY - ST - ZIP CITY-ST-ZIP DELFTE 2.1 TITLE Channe Addition HERRERA, MONICA 22 NAME 9501 N.W. 27TH AVENUE STREET ADDRESS 2 3 STHEET ADDRESS MIAMI FL 33147 CITY-ST-ZIP 2 4 CITY - ST - ZIP DEFFTE Addition Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-\$1-7IP CITY - S1 - ZIP Change THILE DELETE 4.1 TITLE Addition 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-S1-ZIP CHY-ST-ZIP DELLTE Change Addition 5.1 THEF TITLE NAME 5.2 NAME 5.3 STREET ADDRESS

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 Statutes. I further certify that the information indicated on this enriced 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 emplowered to be ecute 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 attructurent with an address Section 119.07(3)(i), Florida Statutes. I further certify that the information

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.4 CITY-ST-7IP

SIGNATURE:

STREET ADDRESS

STHEFT ADDRESS

CITY-ST-ZIP

DELETE

Change

Addition