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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	REPORT		<i>3</i> /		cretary of St LOF CORPC	RATIONS							
OCUME	ENT #	P9400	0007	7579	(8)								
INSURANCE MAN OF APOPKA, INC.													
ncipal Place of I	Business		Mailing	Address				i idiittäät sia taite au	DII WWIN WHIN			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
·	GE BLOSSOM TRA	AIL			E BLOSSOM	TRAIL							
APOPKA FL 3 US	2703		US	OPKA FL 32 S	<i>7</i> 03		3. Da	te Incorporated or C	aualified		of Last Rep)5/01/19		
							4 50	10/20/1994 Number				pplied For	
Principal Place	of Business		P	iling Address	3		1 7. 1	59-3275353			<u> </u>	ot Applicable	
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc			5. Certificate of Status		esired		\$8.75 Additional Fee Required		
City & State			h	y & State				ection Campaign Fin				May Be to Fees	
		· · · · · · · · · · · · · · · · · · ·	28 Zip	·····	Т (Country		is corporation has lia	ability for int	angible ta	x under s	199.032,	
Zip	25	auntry	29	-	30		Fic	orida Statutes	Yes	□ No			
	9. Name and A	ddress of Curren		d Agent		81 Name		ame and Address	of New Re	gistered /	agent		
TRINH, THACH 521 S. ORANGE BLOSSOM TRAIL APOPKA FL 32703						82 Stree	Address (P.O.	dress (P.O. Box Number is Not Acceptab					
						84 City				FL	85 Zip	Code	
Pursuant to or registered tomitor with	the provisions of agent, or both, i	Sections 607.0502 in the State of Flori	2 and 607.1 id4 Such ch tion 607.050	ienigo mod or		above-named the corporation		mits this statement ctors. I hereby accep		ose of cha intment as			
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SIGNATURE: UMW THACH T. TRINH, PRESIDENT 4-17-96

(407)880-2090