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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra Q. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P94000085851 (1)

			INSURANCE				, INC	•								
Principal Place of Business Mailing Address 82330 OVERSEAS HIGHAY POST OFFICE BOX 420 STE 1 TAVERNIER FL 33070 US							0				DO NOT	WRITE IN TI		-		_
US											 Date Incorporated or Qu 11/28/1994 	alified				
2. Principal P	lace of Busi	ness		28	. Mailing A	ddress					4. FEI Number			Apı	plied For	
21				26							65-0548300			Not	Applicable	•
Suite, Apt. #, etc.				27							5. Certificate of Status Desi	red 🗆		.75 A ee Re	dditional quired	
City & State				28							Election Campaign Finar Trust Fund Contribution	cing			May Be o Fees	
Zip		\Box c	ountry		Zφ		c	ountry	,		8. This corporation owes or	has paid the		ar Inta	ngible	7
24		25		29	· · · · · · · · · · · · · · · · · · ·		30				Personal Property Tax du		Yes		No	4
			Address of Curren	t Hegis	stered Age	nt		81	Name		10. Name and Address of I	lew Registe	red Agent			-
	TERRILL, JA							"	Name							╛
92330 OVERSEAS HIGHWAY STE 1								82	Street A	Address (P.O. Box Number is Not Acceptable)						
Į ⊤	TAVERNIER	FL 3	3070					63								1
								84	City				=L 85	Zip C	Code	
11. Pursuant	to the provis	sions o	Sections 607.050	2 and €	507.150B, F	Iorida Statul	es, the	above	-named c	corpor	ration submits this statement f	or the purpos	se of chang	ing its	registered	1
agent. La	m familiar w	gertt. o rith. un	r both, in the blate d accept the obliga	of Hon ations c	da, Such c	hange was . 307.0 5 05, Fi	authoriz orida St	ed by atutes	the corpo	oration	n's board of directors. I hereb	y accept the	appointme	nt as i	egistereu	1
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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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or levelse 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 or an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

SIGNATURE

STREET ADDRESS

nes 6. TERRILL

FILED

Apr 14 1998 8:00am

Secretary of State

305-853-5450