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

Mailing Address
7440-A SO FEDERAL HWY

PT ST LUCIE FL 34952-1417

SUITE 107

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

7440 SOUTH US HWY ONE

PORT ST. LUCIE FL 34952

#408



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 29 1997 8:00am

Secretary of State

Daytime Phone #

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400088927 (6)

A BETTER DEAL INSURANCE AGENCY OF PORT ST. LUCIE, INC.

Suite, Apt. #, etc.  Suite, Apt. #, etc.  Criy & State  Trust Fund Contribution  Added to Fees  Country  Added to Fees  This corporation has liability for intangible tax under s. 199.032,	US	us			US				3.	3. Date Incorporated or Qualified 3a. Date of Last Report				
Suite, April #, etc.    Suite, April #, etc.				-							U4/2	······································		
Suite, April 4, etc.    Suite, April 4, etc.	<del></del>			2a. Mailing Address					4.			<del>   '</del>		
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City & State 28   City & Country 2   Zip	Suite, Apt. #, etc.			<del> </del> 3				.5.	Certificate of Status Desired					
Zig		3	City & State					6.	Election Campaign Financing		\$5.00	May Be		
Second   S	23			28	28					Trust Fund Contribution				
B. Name and Address of Current Registered Agent  KILLER CLYDE G ESO 7440-A SO FEDERAL HWY SUITE 107 PORT ST LUCIE FL 34953  82  Street Address (P.O. Box Number is Not Acceptable)  83  Street Address (P.O. Box Number is Not Acceptable)  84  City FL 85  Zip Codo  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 agent I am hardles with and ecopt the obligations of Section 50.050. Floridas Statutes, be above-named corporation submits this statement for the purpose of changing its registered agent I am hardle with and ecopt the obligations of Section 50.050. Floridas Statutes.  SIGNATURE  12.  OFFICER AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12.  OFFICER AND DIRECTORS  13.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12.  OFFICER AND STATE  PS  MINACAPELIL, LEONARD JR  12. NAME  13. NAME  13. NAME  14. Supplies Address  14. Supplies Address  15. Supplies Addres		C	ountry	Zip	Zip Cour			The corporation has mading to make an order or			. 199.032,			
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SUITE 107 PORT ST LUCIE FL 34953  83  64 City FL 68 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent an iterated with, and accept the obligations of, Section 607 5056. Florids Statutes, and the corporation is board of directors. I hereby accept the expositionend of Section 607 5056. Florids Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILLE  15. TAME  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. TAME  15. TAM								00 00 10 11 11 11 10 00 00 11 11 11 11 1						
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