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FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000027645 (7)

1. Corporation Name

HOME AND AUTO INSURANCE COMPANY

Principal Place of Business

2500 N.W. 79TH AVENUE
MIAMI FL 33122

Mailing Address

2500 N.W. 79TH AVENUE
MIAMI FL 33122



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1995

4. FEI Number

65-0572255

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

STATE TREASURER AND INSURANCE COMMISSIONER
THE CAPITOL
TALLAHASSEE FL 32399-0300

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DCP
NAME ALVAREZ, JOSE M
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI FL 33122 ☐ DELETE

TITLE D
NAME SUEIRAS, MARIO
STREET ADDRESS 8224 S.W. 84TH AVENUE
CITY-ST-ZIP MIAMI FL 33143 ☐ DELETE

TITLE DS
NAME SOTO, JOHN M
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI FL 33122 ☐ DELETE

TITLE D
NAME CASTELLANOS, RAIMUNDO J.
STREET ADDRESS 2500 NW 79TH AVE
CITY-ST-ZIP MIAMI FL ☒ DELETE

TITLE DV
NAME VALDES-FAULI, JUAN P
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI FL 33122 ☒ DELETE

TITLE AS
NAME LOPEZ, JORGE A
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI FL 33122 ☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME DV
4.3 STREET ADDRESS SERGIO FERNANDEZ
4.4 CITY-ST-ZIP 2500 NW. 79th Avenue
Miami, FL. 33122

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME AS
6.3 STREET ADDRESS PERRY I. CONE
6.4 CITY-ST-ZIP 2500 NW. 79th Ave.
Miami, FL. 33122

14. I hereby 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 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.

JOSE M. ALVAREZ (Director)

SIGNATURE:

Jose M. Alvarez

(305) 715-0000, Ext. 3379

CP2E034 (10/97)