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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000078379 (1)

1. Corporation Name

LIBERTY UNDERWRITERS, INC.



Principal Place of Business

850 NORTH STATE ROAD 7
PLANTATION FL 33317

Mailing Address

850 NORTH STATE ROAD 7
PLANTATION FL 33317

3. Date Incorporated or Qualified

10/12/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

KOWITT, BARRY D
1801 N. PINE ISLAND RD.
#101
PLANTATION FL 33322

10. Name and Address of New Registered Agent

81

Name

Vickie Goldstein

82

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

850 N. SR 7

83

Plantation, FL 33317

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.06(2) and 607.1505, 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 imposed by Sections 607.06(2) and 607.1505, Florida Statutes.

SIGNATURE

Signature typed or printed in block letters of each person signing this statement.

For the Registered Agent sign only after corporation has signed.

DATE

4-11-96 Vickie Goldstein (954) 583-3333

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

D.P. Fred Kogan
19667 Turnberry Way #195
Aventura, FL 33180

S Vickie Goldstein
850 N. SR 7
Plantation, FL 33317

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 this 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-96 V. Goldstein - sec

4-22-96 (954) 583-3333

CR2E034 (12/95)