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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # **P96000000325 (6)**

1. Corporation Name
SCHULMAN WASSERMAN & ASSOCIATES INSURANCE GROUP, CORP.II

Principal Place of Business	Mailing Address
701 NORTH STATE ROAD 7 (441) HOLLYWOOD FL 33021	701 NORTH STATE ROAD 7 (441) HOLLYWOOD FL 33021-5802

(441) (441)

2. Principal Place of Business	2a. Mailing Address
21 701 North State Rd 7	26 701 North State Rd 7
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Hollywood	28 City & State: Hollywood
24 Zip: 33021 Country: 25 Broward	29 Zip: 33021 Country: 30 Broward

3. Date Incorporated or Qualified: 01/02/1996
3a. Date of Last Report: 1-2-96
4. FEI Number: 65-0630503 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name: Ana Belkis Oliva.
82 Street Address (P.O. Box Number is Not Acceptable): 5620 McKinley St.
83
84 City: Hollywood FL 85 Zip Code: 33021

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: Ana Belkis Oliva 5-23-97
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BAICH, GEORGE M 701 NORTH STATE ROAD 7 (441) HOLLYWOOD FL 33021 ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Pd. Baich George M. 701 N State Rd 7 (441) Hollywood Fl. 33021 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD PENA, OTTO 701 NORTH STATE ROAD 7 (441) HOLLYWOOD FL 33021 ☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP Lizette Gonzalez 701 N State Rd 7 (441) Hollywood Fl. 33021 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD OLIVA, ANA BELKIS 701 NORTH STATE ROAD 7 (441) HOLLYWOOD FL 33021 ☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	STD Oliva, Ana Belkis 701 N State Rd 7 (441) Hollywood Fl. 33021 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do 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.

SIGNATURE: (954) 4-29-97 356-3586