

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

FILED

**May 15 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000005232 (9)

1. Corporation Name
BOND RE, INC.



Principal Place of Business 5720 SAN AMARO DRIVE CORAL GABLES FL 33146	Mailing Address 5720 SAN AMARO DRIVE CORAL GABLES FL 33146-2425
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3. Date Incorporated or Qualified 01/16/1996	3a. Date of Last Report 01/10/96
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2. Principal Place of Business 21 6827 SW 4058	2a. Mailing Address 26 5720 SAN AMARO DR.
Suite, Apt. #, etc. 22 6827 SW 4058	Suite, Apt. #, etc. 27
City & State 23 Miami	City & State 28 Fla. Coral Gables
Zip 24 33155	Country 25 U.S.
Zip 29 33146	Country 30 U.S.

4. FEI Number 65-0640531	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**BARNETT, BRIAN K
% HELLER & BARNETT CORPORATE SERVICES
1214 N. UNIVERSITY DR.
PLANTATION FL 33322**

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 Heller / Barnett (same as above) DATE

12. OFFICERS AND DIRECTORS

TITLE (V.P.)	<input type="checkbox"/> DELETE
NAME Valerie Medina	
STREET ADDRESS 5720 SAN AMARO DR. 33146	
CITY-ST-ZIP Coral Gables, Fla.	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME Vernon Medina	
1.3 STREET ADDRESS 5720 SAN AMARO DR.	
1.4 CITY-ST-ZIP Coral Gables, Fla. 33146	
2.1 TITLE V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME Dorch J. Medina	
2.3 STREET ADDRESS 5720 SAN AMARO DR.	
2.4 CITY-ST-ZIP Coral Gables 33146	
3.1 TITLE Valerie Medina	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME 6841 SW 48th VP	
3.3 STREET ADDRESS Miami, Fla. 33155	
4.1 TITLE Sheila Medina	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME 5720 SAN AMARO DR.	
4.3 STREET ADDRESS Coral Gables,	
4.4 CITY-ST-ZIP Fla. 33146	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 [Signature] DATE 05/15/97

(305) 112-9933

CR2E034 (9/96)