

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

FILED

May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000018052 (6)

1. Corporation Name
J. BERGER AGENCY, INC.



Principal Place of Business
1801 BELVEDERE RD., SUITE 4035
WEST PALM BEACH FL 33406

Mailing Address
1801 BELVEDERE RD., SUITE 4035
WEST PALM BEACH FL 33406-1541

3. Date Incorporated or Qualified
02/26/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1801 Belvedere Rd
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 Suite 403 S

27 same

23 West Palm Beach FL

28 City & State

24 33406 25 USA

29 30

4. FEI Number

65-0715763

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

BERGER, JENNIFER
1900 N. CONGRESS AVE.
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name Berger, Jennifer
82 Street Address (P.O. Box Number is Not Acceptable)
4940 Haverhill Commons Circle
83 Apt. 16
84 City West Palm Beach FL 85 Zip Code 33417

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 off-cc 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 Jennifer Jane Berger

Signature, typed or printed name of registered agent and then applicable

Jennifer J. Berger

NOTE: Registered Agent signature required (when reinstating)

4/29/97

DATE

12. OFFICERS AND DIRECTORS

TITLE	President	<input type="checkbox"/> DELETE
NAME	Jennifer J. Berger	
STREET ADDRESS	4940 Haverhill Commons Cir. Apt 16	
CITY-ST-ZIP	West Palm Beach, FL 33407	
TITLE	Vice President	<input type="checkbox"/> DELETE
NAME	Daniel W. Berger	
STREET ADDRESS	1916 Corden Ave	
CITY-ST-ZIP	Bronx NY 10462	
TITLE	Secretary	<input type="checkbox"/> DELETE
NAME	Michael W. Berger	
STREET ADDRESS	68 Virginia Ave	
CITY-ST-ZIP	Danbury, CT 06810	
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
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: Jennifer Jane Berger
Signature and typed or printed name of signing officer or director
Date 4/29/97
Daytime Phone # 561-697-8252

CR2E034 (9/96)