SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000091477 (5)

- ESSEX UNDERWRITING MANAGEMENT GROUP, INC.

Principal Place of Business

757 S.E. 17TH STREET #318

Mailing Address

757 S.E. 17TH STREET #318

FILED 97 AUG 11 PM 11: 18

CHUNETARY OF STATE FALL MIASSEE, FLORIDA

FORT LAUDERDALE FL 33316		FORT LAUDERDALE FL 33316		DO NOT WRITE IN THIS SPACE		
				 Date Incorporated or Qualified 11/04/1996 	3a. Date of Last Report	
	lace of Business	2a. Mailing Address	-44 -1 1	4. FEI Number	Applied For	
21 2691	East Oakland Park Blud		1' Stire 1	65.0698741	Not Applicable	
	00	Suite, Apt. #, etc. 27 3/8	<u>-</u>	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	LAuderdale, Fl	City & State	late F1	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip F1,	33306 25 U.5	Zip 29 337/6	Country 30 し, S	This corporation owes or has pa Personal Property Tax due June		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
DUBOIS, ELIZABETH 81 Name Samuel P. CATISON						
757 S.E. 17TH STREET #318			82 Street A	99 Chant Address (D.O. Day Number in Not Assentable)		
FORT LAUDERDALE FL 33316				757 S.E. 17" Street +318		
			83			
			84 City For	H LAUderdale	FL 85 Zip Code 333/6	
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						
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 far fair hier with, and accept the abligations of Section 607.0505, Florida Statutes.						
SIGNATURE Samuel Ti Carlson						
	Signature, typed or printed name of registered agent a	and title if applicable (NOTE:	Registered Agent signature re		DATE	
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	PD OOU MOUATI	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	BLOSH, MICHAEL		1.2 NAME		•	
STREET ADDRESS	757 S.E. 17TH STREET #318		1.3 STREET ADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33316	DELETE	1.4 CITY-ST-ZIP		Change Addition	
TITLE	CARLSON, SAMUEL P	L. DELETE	2.1 TITLE		Change L Audition	
NAME	767 S.E. 17TH STREET #318		2.2 NAME			
STREET ADDRESS	FORT LAUDERDALE FL 33316		2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	STD	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition	
NAME	DUBOIS, ELIZABETH	<u> </u>	3.2 NAME	8000022	2675 <u>9</u> 89	
STREET ADDRESS	757 S.E. 17TH STREET #318		3.3 STREET ADDRESS	-08/147	2 675989	
CITY-ST-ZIP	FORT LAUDERDALE FL 33316		3.4. CITY-ST-ZIP	****16	5.00 ****165.00	
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition	
NAME 🖳			5.2 NAME		ļ	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CiTY-ST-ZIP			
TITLE		☐ DELETE	6.1 TIFLE	·	Charge	
NAME			6.2 NAME		//UX /	
STREET ADDRESS			6.3 STREET ADDRESS		164/	
CITY - ST - ZIP			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.

Essex Underwriting Management Group, Inc.

ps.2

Florida Department of State Division of Corporations Attention: Annual Reports P.O. Box 6327 Tallahassee, Fl. 32314 July 21, 1997

To Whom It May Concern:

Please note that Essex Underwriting Management Group, Inc., never received our first notice for the enclosed annual report packet. Therefore, as per my telephone conversation with your office I am enclosing a check for \$165.00 for our filing fee.

Thank you for your assistance.

Sincerely,

mill Had

Michael Blosh - President