

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.)

FILED
Jul 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000099699 (6)**

1. Corporation Name

TOTAL UNDERWRITERS INC.

Principal Place of Business

**9485 SW 72 ST. #A295
MIAMI FL 33173**

Mailing Address

**9485 SW 72 ST. #A295
MIAMI FL 33173**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/10/1986** 3a. Date of Last Report

4. FEI Number **65-0722441** 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 9485 SW 72 St

Suite, Apt. #, etc.

22 A-247

City & State

23 Miami FL

Zip

24 33173

Country

2a. Mailing Address

26 9485 SW 72 St

Suite, Apt. #, etc.

27 A-247

City & State

28 Miami FL

Zip

29 33173

Country

30

9. Name and Address of Current Registered Agent

**PEREZ, JORGE S
9485 SW 72 ST. #A295
MIAMI FL 33173**

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

[Signature]
Signature, typed or printed name of registered agent and title if applicable

Pres

(NOTE: Registered Agent signature required when reinstating)

6/14/97

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	PEREZ, JORGE S	
STREET ADDRESS	9485 SW 72 ST. #A295	
CITY-ST-ZIP	MIAMI FL 33173	

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
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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

11 TITLE	Director Vice Pres & Secretary	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	Rene T Sanchez	
13 STREET ADDRESS	9485 SW 72 St A247	
14 CITY-ST-ZIP	Miami FL 33173	

21 TITLE	Director & Vice Pres	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Jorge Perez	
23 STREET ADDRESS	9485 SW 72 St A247	
24 CITY-ST-ZIP	Miami FL 33173	

31 TITLE	Director, President & Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Jorge S Perez	
33 STREET ADDRESS	9485 SW 72 St #a247	
34 CITY-ST-ZIP	Miami FL 33173	

41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		

51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		

61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 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]* **SIGNATURE: Jorge Perez, Pres**

7-14-97 305-275-5661

CR2E034 (4/97)