

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED  
Aug 06 1998 8:00am  
Secretary of State

DOCUMENT # P97000022031 (3)

1. Corporation Name

MYCOMP INS AGENCY CORP.

Principal Place of Business  
4320 NW 196TH ST.  
CAROL CITY GARDENS FL 33055

Mailing Address  
4320 NW 196TH ST.  
CAROL CITY GARDENS FL 33055

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/11/1997

4. FEI Number

65-0733942

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

9. Name and Address of Current Registered Agent

RODRIGUEZ, MARCOS I  
4320 NW 196TH ST.  
CAROL CITY GARDENS FL 33055

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PD  
MARCOS I RODRIGUEZ  
4320 NW 196 ST  
CAROL CITY GARDENS FL

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP



Change



Addition



Change



Addition



Change



Addition



Change



Addition



Change



Addition



Change



Addition

200002610192

-08/07/98--01014--015

\*\*\*150.00

PE  
8/6

14. I 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

7/31/98

CR2E034 (5/98)

2

JULY 31, 1998

DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL. 32314

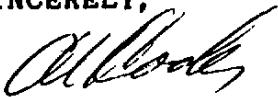
DEAR SIR,

WE NEVER RECEIVED OUR FIRST NOTICE. AFTER A CALL TO YOUR OFFICES WE WERE INSTRUCTED TO COMPOSE A LETTER OF EXPLANATION RETURNED WITH A \$150.00 CHECK TO DIVISION OF CORP. TO THE ABOVE ADDRESS.

PLEASE FIND CHECK NUMBER 1288 FOR \$150.00 ENCLOSED.

THANK YOU FOR YOUR HELP AND COOPERATION.

SINCERELY,



MARCOS I. RODRIGUEZ  
/PRESIDENT