

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

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Mar 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000051639 (7)

1. Corporation Name

BEST CHOICE INSURANCE INC.



Principal Place of Business 2903 N.E.163RD ST. APT 603 NORTH MIAMI BEACH FL 33160	Mailing Address 2903 N.E.163RD ST. APT 603 NORTH MIAMI BEACH FL 33160
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1744 South Young Circle Suite, Apt. #, etc. 22 City & State 23 Hollywood, FL Zip 24 33020		2a. Mailing Address 26 1744 South Young Circle Suite, Apt. #, etc. 27 City & State 28 Hollywood, FL Zip 29 33020		3. Date Incorporated or Qualified 06/11/1997	
Country 25 Broward		Country 30 Broward		4. FEI Number 65-0760003 Applied For Not Applicable	
9. Name and Address of Current Registered Agent RODRIGUEZ, DAVID 2903 N.E.163RD ST.- APT 603 - NORTH MIAMI BEACH FL 33160 -		10. Name and Address of New Registered Agent 81 Name SAME 82 Street Address (P.O. Box Number is Not Acceptable) 210-172 Street Apt. 130 83 84 City Sunny Isles Bch FL 85 Zip Code 33160		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 owes or has paid the current year Intangible Personal Property Tax due June 30 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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 DAVID RODRIGUEZ (President) DATE 3/12/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, DAVID 2903 N.E.163RD ST. NORTH MIAMI BEACH FL 33160 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Address only 210-172 Street Apt. 130 Sunny Isles Bch, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD AMAT, JENNY 2903 N.E.163RD ST. NORTH MIAMI BEACH FL 33160 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Address only 210-172 Street Apt. 130 Sunny Isles Bch, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: DAVID RODRIGUEZ President DATE 3/12/98 (954) 922-7707

CR2E034 (10/97)