SECOND NOTICE: CORPORATION WILL JE DISSO AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, Im.

PROFIT CORPORATION ANNUAL REPORT

1998



MBER 30, 1998. TATE: \$750).

OF STATE

Bandra L. Mortham

Secretary of State -

DIVISION OF CORPORATIONS

DOCUMENT# P97000065186 (3)

FILED Oct 07 1998 8:00am Secretary of State

BHOWN	INSURANCE GROUP, INC	· (4		
Principal Plac	e of Business	Mailing Address	····	
1600 SW 65 TE	PRACE	1600 SW 65 TERRACE		
BOCA RATON		BOGA RATON FL 33428		
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				07/28/1997
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
21		26		65-0769878 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
<u></u>		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28]	T 2	Trust Fund Contribution L Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year intangible
24	25	29	30	Personal Property Tax due June 30. Yes No No
	9, Name and Address of Curre		81 Name	10. Name and Address of New Registered Agent
	PORATE CREATIONS ENTERP	11SES, INC	81 Name	KICHARD M. BROWN_
4521	ress (P.O. Box Number is Not Acceptable)			
PALM BEACH GARDENS FL 33418 9 9				120 NW 6 Court
		•	83	
			84 City	85 Zip Code
			" " +	lantation FL 32324
11. Pursuant	to the provisions of sections 607.05	02 and 607.1508, Florida Statuti	es, the above-named corpo	ration submits this statement for the purpose of changing its registered
office or	registered agent or both, in the State	e of Florida. Such change was a	authorized by the corporati	ration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
		games of, 600 troit (607,0000), 11	orido Ciacotos.	Tul. 6 1008
SIGNATURE	Signature, typied or printed name of registered ag	ont and title if applicable (N	OTE: Registered Agent signature requ	ulred when reinstating) DATE
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	BROWN, RICHARD M		1.2 NAME	
STREET ADDRESS	1600 SW 65 TERRACE		1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33428		1.4 CITY-ST-ZIP	·
TITLE		DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	•
CITY-ST-ZIP			2.4 CITY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4.2 NAME	L Onange Modition
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME		L_J DECEIE	5.2 NAME	Change Addition
STREET ADDRESS			5.3 STREET ADDRESS	İ
CITY-ST-ZIP TITLE			6.1 TITLE	
1		DELETE		Change Addition
NAME			6.2 NAME	j
STREET ADDRESS			63 STREET ADDRESS	
CITY-ST-ZIP	will that the information armstind of	th this filing does not supply for	6.4 CITY-ST-ZIP	tion (40 07/2VI) Florido Statutos I fuebra - addicabat the información
indicated o	eriny mat the information supplied with this annual report or supplementa	ri this thing does not quality for t il annuel report is true and accu	ine exemption stated in sec Irate and that my signature	tion 119.07(3)(i), Florida Statutes. I further certify that the information shall have the same legal effect as if made under oath; that I am

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 eath; that I am an officer or director of the corporation or the reports 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 integrment of the analyses.

IGNATURE:

JUN 6, 1998

SIGNATURE: