

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

FILED

Feb 02 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 # **P97000083996 (3)**
1. Corporation Name
FLORIDAS BEST INSURANCE & AUTO TAG SERVICE INC.



Principal Place of Business 5194 SW 90 TERR COOPER CITY FL 3328	Mailing Address 5194 SW 90 TERR COOPER CITY FL 3328
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business FLORIDAS BEST INSURANCE & AUTO TAG SERVICE INC. 5194 SW 90 TERR COOPER CITY FL 3328		2a. Mailing Address 5194 SW 90 TERR COOPER CITY FL 3328	3. Date Incorporated or Qualified 09/26/1997
21. FLORIDAS BEST INSURANCE & AUTO TAG SERVICE INC.	26. 5194 SW 90 TERR	4. FEI Number 65-0687702	Applied For <input checked="" type="checkbox"/> Not Applicable
22. 5194 SW 90 TERR	27. COOPER CITY FL 3328	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. COOPER CITY FL 3328	28. COOPER CITY FL 3328	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. COOPER CITY FL 3328	29. COOPER CITY FL 3328	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent HOFF, LOUIS SCOTT 5194 SW 90 TERR COOPER CITY FL 3328		10. Name and Address of New Registered Agent 5194 SW 90 TERR COOPER CITY FL 3328	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable)	
83. City		84. City	
85. Zip Code		86. 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 607.0105, Florida Statutes.

SIGNATURE **L. Scott Hoff PRES** DATE **1/20/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE L. SCOTT HOFF	1.1 TITLE L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME L. SCOTT HOFF	1.2 NAME L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 5194 SW 90 TERR	1.3 STREET ADDRESS 5194 SW 90 TERR	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP COOPER CITY FL 3328	1.4 CITY-ST-ZIP COOPER CITY FL 3328	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE L. SCOTT HOFF	2.1 TITLE L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME L. SCOTT HOFF	2.2 NAME L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 5194 SW 90 TERR	2.3 STREET ADDRESS 5194 SW 90 TERR	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP COOPER CITY FL 3328	2.4 CITY-ST-ZIP COOPER CITY FL 3328	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE L. SCOTT HOFF	3.1 TITLE L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME L. SCOTT HOFF	3.2 NAME L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 5194 SW 90 TERR	3.3 STREET ADDRESS 5194 SW 90 TERR	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP COOPER CITY FL 3328	3.4 CITY-ST-ZIP COOPER CITY FL 3328	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE L. SCOTT HOFF	4.1 TITLE L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME L. SCOTT HOFF	4.2 NAME L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 5194 SW 90 TERR	4.3 STREET ADDRESS 5194 SW 90 TERR	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP COOPER CITY FL 3328	4.4 CITY-ST-ZIP COOPER CITY FL 3328	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE L. SCOTT HOFF	5.1 TITLE L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME L. SCOTT HOFF	5.2 NAME L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 5194 SW 90 TERR	5.3 STREET ADDRESS 5194 SW 90 TERR	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP COOPER CITY FL 3328	5.4 CITY-ST-ZIP COOPER CITY FL 3328	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE L. SCOTT HOFF	6.1 TITLE L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME L. SCOTT HOFF	6.2 NAME L. SCOTT HOFF	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 5194 SW 90 TERR	6.3 STREET ADDRESS 5194 SW 90 TERR	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY-ST-ZIP COOPER CITY FL 3328	6.4 CITY-ST-ZIP COOPER CITY FL 3328	<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 unchanged, or on an attachment with an address.

SIGNATURE **L. SCOTT HOFF** DATE **1/20/98**

CR2E034 (10/97)