

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

FILED
Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000095809 (4)
 1. Corporation Name
LATIN AMERICAN REINSURANCE EXCHANGE, INC.



Principal Place of Business: ~~150 2ND AVENUE NORTH #500 ST. PETERSBURG FL 33701~~
 Mailing Address: ~~150 2ND AVENUE NORTH #500 ST. PETERSBURG FL 33701~~

DO NOT WRITE IN THIS SPACE
 3. Date Incorporated or Qualified
11/07/1997

2. Principal Place of Business
 21 **405 CENTRAL AVE**
 Suite, Apt. #, etc. **303**
 22 **303**
 City & State **ST. PETERSBURG FL**
 Zip **33701-3839** Country **PINELLAS**
 23 **33701-3839** 25 **PINELLAS**
 2a. Mailing Address
 26 **3813 N. CAUSEWAY BLVD**
 Suite, Apt. #, etc. **SUITE 100**
 27 **SUITE 100**
 City & State **METAIRIE, LA**
 Zip **70002** Country **USA**
 28 **METAIRIE, LA**
 Zip **70002** 30 **USA**

4. FEI Number
62-1729129
 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
GONZALES, DAVE
~~150 2ND AVENUE NORTH #500~~
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
405 CENTRAL AVE SUITE 303
 83
 84 City **ST. PETERSBURG** FL 85 Zip Code **33701-3839**

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of 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 *Dave Gonzales* **DAVE GONZALES** **2-28-98**
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	DELETE
D	JAKELIS, TODD A	150 2ND AVENUE NORTH #500 405 CENTRAL AVE #303	ST. PETERSBURG FL 33701	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
		405 CENTRAL AVE STE. 303		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	Change	Addition
CHAIRMAN	RONALD A. JAKELIS	3813 N. CAUSEWAY BLVD. #100	METAIRIE LA 70002	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Ronald A. Jakelis* **APR 23 1998**

CR2E034 (10/97)