	PROFIT DRPORATION VUAL REPORT 1996	Sandr Secre DIVISION O	PARTMENT OF STATE a B. Mortham atary of State F CORPORATIONS		
1. Corpora	JMENT # S0749 RNATIONAL ASSURANCE GR	(-)			
Principal Pla	ace of Business	Mailing Address			)
P.O. BOX PLANTATIO	16480 ON FL 33318	P.O. BOX 16480 PLANTATION FL 33318	3		
2. Principal	Place of Business			3. Date Incorporated or Qualified 10/18/1990	3a. Date of Last Report 06/12/1995
<u> </u>	Place of Business Street	2a. Mailing Address 26 P.O. Box	16480	4. FEI Number	Applied For
Suite, Ap	t #, etc	Suite, Apt. #, etc.	100	65-0221612	Not Applicable  \$8.75 Additional
City & Sta	ate .	City & State		5. Certificate of Status Desired	Fee Required
Zip Zip	tation, FL	28 Plantation		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
333		Zip 29 33318	Country  30 Rroward	8. This corporation has liability for	intangible tax under s. 199 032.
	Name and Address of Current RICK, WILLIAM WATSON JR.	Registered Agent	30  Broward	Florida Statutes  10. Name and Address of New Re	Yes No
TI	80 SOUTH FEDERAL HIGHWAY HIRD FLOOR OMPANO BEACH FL 33062		82 Street Add 83	dress (P.O. Box Number is Not Acceptal	
11. Pursuant office or i agent Ta	to the provisions of Sections 607,0502 a registered agent, or both, in the State of em familiar with, and accept the obligation	and 607.1508, Florida Statut Florida Such change was a	es, the above-named corputationized by the corporal	poration submits this statement for the pution's board of directors. Thereby account	FL 85 Zip Code
11. Pursuant office or a gent 1 a	and decept the obligant	Section 607 0505, Fig	orida Statutes	to a second vita only document	
•	Signature, typed or pented name of registered agent a OFFICERS AND I	nd their applicable (NO	rrida Statutes E Registered Agent signature requ	ned wher tendalings	urpose of changing its registered the appointment as registered
SIGNATURE  12.	Signature, typed or pented name of registered agent a  OFFICERS AND I	nd their applicable (NO	orida Statutes	the state of the stay documents	urpose of changing its registered the appointment as registered  LAL  ERS AND DIRECTORS IN 12
SIGNATURE	Signature, typed or pented name of registered agent a OFFICERS AND I DP MITTLEHAUSER, THOMAS	ond tite if applicable (NOT DIRECTORS	t Fregistered Agent signature requirements  13. 1.1 TITLE 1.2 NAME	ned wher tendalings	rpose of changing its registered the appointment as registered
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