

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

043394

PROFIT CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S35653

1. Corporation Name
COMMERCIAL BROKER SERVICES, INC.

Principal Place of Business

402 S. KENTUCKY AVE
4TH FLOOR
LAKELAND FL 33801
US

Mailing Address

PO BOX 3665
LAKELAND FL 33802
US

2. Principal Place of Business

21 Suite, Apt. #, etc
22 City & State
23 Zip Country
24 25

2a. Mailing Address

26 Suite, Apt. #, etc
27 City & State
28 Zip Country
29 30

9. Name and Address of Current Registered Agent

SUTTON, CARLOS K.
402 S KENTUCKY AVE
4TH FLOOR
LAKELAND FL 33801

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation, in submitting 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. The hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent for the corporation

Printed Name of Agent

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PD	SUTTON, CARLOS K.	402 S KENTUCKY AVE #400	LAKELAND FL
[] DELETE			
[] DELETE			
[] DELETE			
[] DELETE			
[] DELETE			
[] DELETE			
[] DELETE			
[] DELETE			
[] DELETE			

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-STATE-ZIP	15 CITY-STATE-ZIP	16 CITY-STATE-ZIP	17 CITY-STATE-ZIP	18 CITY-STATE-ZIP	19 CITY-STATE-ZIP	20 CITY-STATE-ZIP
[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add
[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add
[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add
[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add
[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add
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[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add
[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add
[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add	[] Change	[] Add

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 139.07(1)(g), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other fees empowered.

SIGNATURE: Carlos K. Sutton Carlos K. SUTTON

4-1-99 944-686-1161

CR2E034 (11/98)



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 213428 7139998
AUTHORIZATION : *Valencia B. 1999*
COST LIMIT : \$ 150.00

ORDER DATE : April 21, 1999
ORDER TIME : 2:41 PM
ORDER NO. : 213428-015
CUSTOMER NO: 7139998
CUSTOMER: Mr. Ernest Newborn, Jr.
Usi Holdings, Inc.
235 Pine Street
10th Floor
San Francisco, CA 94104

ANNUAL REPORT FILING

NAME: COMMERCIAL BROKER SERVICES,
INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: JEANINE REYNOLDS

EXAMINER'S INITIALS: *B*

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