SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996

that my name appears

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

Jul 02, 1996 08:00 AM

Secretary of State

DOCUMENT #

1. Corporation Name

S65202

(1)

AUTO INSURANCE MARKETING, INC.

	i, INC.			
Principal Place of Business	Mailing Address		1 10011010 10 0101 0110 1110 1101	
535 NORTH STATE ROAD 7	535 NORTH STATE RO	OAD 7		
MARGATE FL 33063	MARGATE FL 33063		Date Incorporated or Qualified	3a. Date of Last Report
			·	05/01/1995
200	2a. Mailing Address		07/05/1991 4. FEI Number	Applied For
Principal Place of Business	2a. Mailing Address		65-0272945	Not Applicable
Suite, Apt #, elc.	Suite, Apt. #, etc.			\$8.75 Additional
1	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
	28		Trust Fund Contribution	L_J Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for i	intangible tax under s. 199 032,] Yes [] No
25	29	[30]	Florida Statutes 10. Name and Address of New Re	
9. Name and Address of Cur	rrent Registered Agent	81 Name	10. Name and Address of New York	9.00.00
POMERANTZ, DONALD		11		day
535 NORTH STATE ROAD 7		82 Street Add	dress (P.O. Box Number is Not Acceptab	ne)
MARGATE FL 33063		83		
				OF 70 Code
		84 City		FL 85 Zip Code
agent. I am familiar with, and accept the ob				
IGNATURE Signature, typed or printed name of registerer		OTE. Begistered Agent's griature requ	used when reliastating:	DAYE
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