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FILED

May 02 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # S80773 (2)

1. Corporation Name  
AIB INSURANCE UNDERWRITERS, INC.

Principal Place of Business

Mailing Address

2500 NW 79 AVE  
CORAL GABLES FL 33122  
US

2500 NW 79 AVE  
CORAL GABLES FL 33122-1071  
US



3. Date Incorporated or Qualified  
09/16/1991

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

65-0323687

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOPEZ, JORGE A.  
2500 NW 79TH AVE.  
MIAMI FL 33122

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 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 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME ALVAREZ, JOSE M.  
STREET ADDRESS 2500 NW 79 AVE  
CITY - ST - ZIP MIAMI FL

1.1 TITLE ☐ Change ☐ Addition

TITLE PD ☐ DELETE

NAME TOLOME0, RICHARD E  
STREET ADDRESS 1460 ROLLING OAKS DR  
CITY - ST - ZIP CANTONMENT FL

1.2 NAME ☐ Change ☐ Addition

TITLE VD ☐ DELETE

NAME SOTO, JOHN M.  
STREET ADDRESS 2500 NW 79 AVE  
CITY - ST - ZIP MIAMI FL

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE TD ☐ DELETE

NAME TORGAS, ED S  
STREET ADDRESS 2500 NW 79 AVE  
CITY - ST - ZIP MIAMI FL

1.4 CITY - ST - ZIP ☐ Change ☐ Addition

TITLE S ☐ DELETE

NAME LOPEZ, JORGE A.  
STREET ADDRESS 2500 NW 79 AVE  
CITY - ST - ZIP MIAMI FL

2.1 TITLE ☐ Change ☐ Addition

TITLE DV ☐ DELETE

NAME FERNANDEZ, SERGIO  
STREET ADDRESS 2500 NW 79 AVE  
CITY - ST - ZIP MIAMI FL

2.2 NAME ☐ Change ☐ Addition

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE A. LOPEZ

4/24/97 (305) 715-0000 X3379

Date Daytime Phone #

CR2E034 (9/96)