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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(3)

C N S INSURANCE GROUP INC.

Apr 20 1998 8:00am Secretary of State

**FILED** 

Principal Place of Business	Mailing Address	a mante derinare tidera erade desida titer delati
2428 SOUTHG STATE ROAD 7	2428 SOUTHG STATE ROAD 7	

MIRAMAR FL 33023		MIRAMAR FL 33023		DO NOT WRITE IN THIS SPACE		
} !				3. Date Incorporated or Qualified		
				02/06/1992		
	lace of Business	2a. Mailing Address	D.	4. FEI Number	Applied For	
21 626 Suite, Apt.	4 MIRAMAR PARKWA	126 6264 MIRA	MAR PARKWA	65-0318118	Not Applicable	
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	MAR. FL	City & State  28 MIRAMAR	FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Žip	Country	Zip	Country	8. This corporation owes or has paid the curr		
24 <b>3</b> 302	3 25 USA	111	O USA		Yes No	
	9. Name and Address of Current	Registered Agent	B1 Name	10. Name and Address of New Registered	Agent	
	REZ, LEIDYS GARCIA	PHILIP LOGAN				
10564 NW 3RD PLACE			82 Street Address (P.O. Box Number is Not Acceptable)			
CORAL SPRINGS FL 33071			OSCTHW SKO PIA	c <del>t</del>		
				<u> </u>		
			84 City	PORAL SHRINGS FL	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named co	orporation submits this statement for the purpose of	changing its registered	
agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligati	r Florida. Such change was aut ons of, Section 607.0505, F <u>l</u> ori	tnorized by the corpoi da Statutes.	ration's board of directors. I hereby accept the app	ointment as registered	
SIGNATURE HULLIP SCOCAL PHILLIP S. COGAN 4/14/98						
12.	Signature, typed or printed name of registered agent.  OFFICERS AND		Registered Agent signature rec		DIDECTORS IN 40	
TITLE	P	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition	
NAME	<b>BOATWRIGHT, LEONARD</b>		1.2 NAME		Critarigo ridoktori	
STREET ADDRESS	930 NE 62ND ST		1.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP			
TITLE	8	DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	COGNN, PHILLIP		2.2 NAME			
STREET ADDRESS	10564 NW THING PLACE		2.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL		2. 4 City-\$t-zip			
TITLE	CAREY ORECORY	☐ DELE <b>te</b>	3.1 TITLE		Change Addition	
NAME	CAREY, GREGORY 962 DOMINICAN DR		3.2 NAME			
STREET ADDRESS	MIAMI FL		3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	MICANI I C	DELETE	3.4. C(TY+ST-ZIP 4.1 T)TLE		Change Addition	
NAME			4, 2 NAME		C. Change C. Radinon	
STREET ADDRESS			4.3 STREET ADDRESS		İ	
CITY-ST-ZIP			4.4 CITY - ST - ZIP		]	
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE	. *	DELETE "	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS	·		6.3 STREET ADDRESS			
CITY-ST-ZIP			64 CITY-ST-ZIP			

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 attacking 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 attacking 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.