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FILED  
Mar 27 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 # V12361 (4)

1. Corporation Name  
NAL INSURANCE SERVICES, INC.



Principal Place of Business  
500 CYPRESS CREEK ROAD WEST  
590  
FORT LAUDERDALE FL 33309  
US

Mailing Address  
500 CYPRESS CREEK ROAD WEST  
SUITE 590  
FORT LAUDERDALE FL 33309-6157  
US

3. Date Incorporated or Qualified 02/05/1992	3a. Date of Last Report 03/18/1996
4. FEI Number 65-0326597	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 P.O. Box 8367  
Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

24 33310-8367 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EMO CORPORATE SERVICES, INC.  
100 N.E. THIRD AVENUE  
SUITE 1100  
FT. LAUDERDALE FL 33301

81 Name Mercedes Padin, Esq.
82 Street Address (P.O. Box Number is Not Acceptable) 500 Cypress Creek Road West, Ste 590
83 City
84 City Fort Lauderdale FL 85 Zip Code 33309

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 of 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 *Mercedes Padin* Mercedes Padin 3/10/97  
(NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE	
TITLE	CDC		
NAME	BARTOLINI, ROBERT R.		
STREET ADDRESS	500 CYPRESS CREEK RD. W, STE 590		
CITY- ST- ZIP	FT. LAUDERDALE FL		
TITLE	PCSD		
NAME	SCHAEFFER, JOHN T.		
STREET ADDRESS	500 CYPRESS CREEK RD W, STE 590		
CITY- ST- ZIP	FT. LAUDERDALE FL		
TITLE	VP		
NAME	STYKA, FRED		
STREET ADDRESS	500 CYPRESS CREEK RD W, STE 590		
CITY- ST- ZIP	FT. LAUDERDALE FL		
TITLE	VPAS		
NAME	CARLSON, ROBERT J.		
STREET ADDRESS	500 CYPRESS CREEK RD W, STE 590		
CITY- ST- ZIP	FT. LAUDERDALE FL		
TITLE	AS		
NAME	WOODSIDE, JOANN		
STREET ADDRESS	500 CYPRESS CREEK RD W, STE 590		
CITY- ST- ZIP	FT. LAUDERDALE FL		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY- ST- ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY- ST- ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY- ST- ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY- ST- ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY- ST- ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY- ST- ZIP			

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 included 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 *JoAnn Woodside* JoAnn Woodside 3/10/97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/97 954-958-3605  
Date Daytime

CR2E034 (9/96)