

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719062

FILED
Apr 28, 2005
Secretary of State

Entity Name: CHIPPER, INC.

Current Principal Place of Business:

1040 CRYSTAL LAKE DR.
APT 2
POMPANO BCH., FL 33064 US

New Principal Place of Business:

1040 CRYSTAL LAKE DR.
POMPANO BCH., FL 33064 US

Current Mailing Address:

1040 CRYSTAL LAKE DR.
APT 2
POMPANO BCH., FL 33064 US

New Mailing Address:

1040 CRYSTAL LAKE DR.
POMPANO BCH., FL 33064 US

FEI Number: 65-0132258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBUQUERQUE, MARIA C
1040 CRYSTAL LAKE DR.
APT 2
POMPANO BCH., FL 33064 US

Name and Address of New Registered Agent:

ALBUQUERQUE, MARIA C
1040 CRYSTAL LAKE DR.
POMPANO BCH., FL 33064 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARIA ALBUQUERQUE

04/28/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ALBUQUERQUE, MARIA
Address: 1040 CRYSTAL LAKE DR, #2
City-St-Zip: POMPANO BCH., FL 33064

Title: VSD () Delete
Name: ALBUQUERQUE, JURANDIR
Address: 1040 CRYSTAL LAKE DR, #2
City-St-Zip: POMPANO BCH., FL 33064

Title: TD () Delete
Name: ALBUQUERQUE, JENNIFER
Address: 1040 CRYSTAL LAKE DR, #3
City-St-Zip: POMPANO BCH., FL 33064

Title: S () Delete
Name: FORNARO, LUIZ
Address: 1040 CRYSTAL LK DR #3
City-St-Zip: POMPANO BCH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: ALBUQUERQUE, MARIA
Address: 1040 CRYSTAL LAKE DR, #3
City-St-Zip: POMPANO BCH., FL 33064

Title: VSD (X) Change () Addition
Name: ALMEIDA, MARIA M
Address: 1040 CRYSTAL LAKE DR, #1
City-St-Zip: POMPANO BCH., FL 33064

Title: TD (X) Change () Addition
Name: NOGUEIRA, ANA C
Address: 1040 CRYSTAL LAKE DR, #4
City-St-Zip: POMPANO BCH., FL 33064

Title: S (X) Change () Addition
Name: HAASE, DEBORAH K
Address: 3062 RIVERSIDE DRIVE #F2
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA ALBUQUERQUE

PTD

04/28/2005

Electronic Signature of Signing Officer or Director

Date