## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 12, 2005 8:00 am Secretary of State DOCUMENT # F93000002222 1. Entity Name 04-12-2005 90135 028 \*\*\*150.00 CHEMPER INC. Principal Place of Business Mailing Address 11 OLD PARHAM ROAD C/O AUBREY CHOY MOONDALE LODGE HILL WOODS, ST MICHAEL ST JOHN ANTIGUA, WEST INDIES, BARBADOS WEST INDIES, 04052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HINSLEY, TODD 233 EAST BAYRIDGE DR DO NOT WRITE WESTON, FL 33327 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE\_ Signeture, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. MLE TAUREL, RICHARD NAME STREET ADDRESS SOUTH RIDGE, CHRIST CHCURCH, BARBADOS WEST INDIES, CITY-ST-ZIP MLE CHOY, AUBREY NAME STREET ADDRESS MOONDALE LODGE HILL WOODS ST MICHAEL CITY-ST-ZIP BARBADOS WEST INDIES, TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TTLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 report or supplemental 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 tristee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment SIGNATURE: LICHARD

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