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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # J85400

(6)

CHESAF	PEAKE CONSTRUCTION OF	BREVARD, INC.					
4356-0 FORTU		Mailing Address 4356-8 FORTUNE PL		I IODINI BOTOR HANDA DARIA GABAN DONIN ROLL	BIDAK DIDIN BIDIK BABA BABA G	JIBII (BD(	
WEST MELBOURNE FL 32904 US		WEST MELBOURNE FL 32804-1532 US					
:					3. Date Incorporated or Qualified 07/30/1987	3a. Date of Last Re 05/21/1996	eport
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26		· · · · · · · · · · · · · · · · · · ·	59-2833285		t Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 A Fee Re	quired
City & Stat	te	<u> </u>	City & State		6. Election Campaign Financing	\$5.00	
23 Zip	Country	28 Zip	Country		Trust Fund Contribution	Added t	
<del></del> ,	25	29	30	f	This corporation has liability for Elorida Statutes	intangible tax under s. ] Yes     □ No	. 199.032,
24	9. Name and Address of Curren		1301		10. Name and Address of New Re		
CAE	RERA, CHARLES T.		81	Name		<u> </u>	
	8-B FORTUNE PL.		82	Stroot Add	ress (P.O. Box Number is Not Acceptate	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	ST MELBOURNE FL 32904		02	Street Add	ress (F.O. Box Normer is Not Acceptat	ne)	
			83				
			84	City		<b> 85</b> Zip 0	Code
				/		FL     '	
11. Pursuant office or	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.1508, Florida Statu of Florida. Such change was	ites, the above authorized by	e-named cor v the corpora	poration submits this statement for the partition's board of directors. I hereby acception's	ourpose of changing its of the appointment as	s registered registered
agent. I a	am familiar with, and accept the obliga	ations of Section 607,0505	lorida Statute	S.		1.1-	
SIGNATURE	CHRILEST CABLELATE Signature, typed or printed name of registered ago	al and talled a popular talled (6)0	_	not eigenfute com-	ired when reinstaling)	46197	
12.	OFFICERS AN	·	13.	i i, aignatoro requ	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR	IS IN 12
TITLE	D DELETE		1 1 THILE			Change	Addition
NAME	CABRERA, CHARLES T.		12 NAME				
STREET ADDRESS	4356-B FORTUNE PL		1.3 STREET	ADDRESS			
CITY-ST-ZIP	WEST MELBOURNE FL 32904		1.4 CITY - S	ST - ZIP			
TITLE		DELETE		ļ		☐ Change	☐ Addition
NAME			2.2 NAME		,		,
STREET ADDRESS	s		2.3 STREET ADDRESS				
CITY-ST-ZIP		I pro Dr	2 4 CITY-1	ST-ZIP			1 4400 -
TITLE	DECETE		3.1 TITLE			L Change	Addition
NAME OVOICE ADDOCCO	T ADDRESS .		3.2 NAME	155550			
STREET ADDRESS			3,3 STREET 3,4. CITY -				
CITY-ST-ZIP TITLE		DELETE	4.1 TITLE	51-ZIP		☐ Change	Addition
NAME	1	<u></u>	4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP			4.4 C(TY-S	- 1			·
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
. NAME		,	5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - 9	51 - ZIP			
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME		•	6.2 NAME				ļ
STREET ADDRESS			6.3 STREET	ı			
CITY-ST-ZIP			6.4 CITY - S	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 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 eath; 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.

MANATURE.

Was Nothing Colors T Charles T Charles

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**FILED** 

Jun 11 1997 8:00am

Secretary of State