


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 18, 2007 8:00 am
Secretary of State

06-18-2007 90001 003 ***150.00

DOCUMENT # P01000040936

1. Entity Name
CHAMELEON SALES 2 INC.



Principal Place of Business
**1080 DEL LAGO CIR 1PT 204
 SUNRISE, FL 33313**

Mailing Address
**8830 NW 73TH CT
 TAMARAC, FL 33321-2421**

2. Principal Place of Business - No P.O. Box #
8346 SW SUNDANCE CR

3. Mailing Address
8346 SW SUNDANCE CIR.

Suite, Apt. #, etc.

City & State
STUART, FL

City & State
STUART, FL

Zip
34997

Country
U.S.A.

401400-



06122007 Chg-P CR2E034 (12/06)

4. FEI Number
65-1114306

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
GONZALEZ, LILIANA
~~1080 DEL LAGO CIR 1PT 204~~
~~SUNRISE, FL 33313~~

7. Name and Address of New Registered Agent
 Name **Liliana Gonzalez**
 Street Address (P.O. Box Number is Not Acceptable)
8346 SW Sundance Circle
 City **Stuart** **FL** Zip **34997**

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 *Liliana Gonzalez*
 Signature, typed or printed name of registered agent and not applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GONZALEZ, LILIANA		NAME	
STREET ADDRESS 1080 DEL LAGO CIR APT 204		STREET ADDRESS	
CITY-ST-ZIP SUNRISE, FL 33313		CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ADAMO, FRED		NAME	
STREET ADDRESS 1080 DEL LAGO CIR APT 204		STREET ADDRESS	
CITY-ST-ZIP SUNRISE, FL 33313		CITY-ST-ZIP	
TITLE Secretary	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Jessica Villoldo		NAME	
STREET ADDRESS 8346 SW Sundance Cir		STREET ADDRESS	
CITY-ST-ZIP Stuart, FL		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 trustee 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 with an address, with all other like empowered.

SIGNATURE: *Liliana Gonzalez*
 Signature and typed or printed name of signing officer or director

Date *June 14, 2007* Daytime Phone # *954 557-7373*

ATTACHMENT 40120948

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



- Home
- Contact Us
- E-Filing Services
- Document Searches
- Forms
- Help

2007 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the appropriate button at the bottom to generate the annual report form.

**** This information cannot be changed on the report. ****

Document Number P01000040936
 Business Entity Name CHAMELEON SALES 2 INC.
 Original File Date 04/20/2001

FEI Number 65-1114306

Principal Address 1080 DEL LAGO CIR 1PT 204
SUNRISE, FL 33313

Mailing Address 8830 NW 75TH CT
TAMARAC, FL 333212421

Registered Agent LILIANA GONZALEZ
1080 DEL LAGO CIR 1PT 204
SUNRISE, FL 33314

Officer/Director Name And Address

P
LILIANA GONZALEZ
1080 DEL LAGO CIR APT 204
SUNRISE, FL 33313

VP
FRED ADAMO
1080 DEL LAGO CIR APT 204
SUNRISE, FL 33313

After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances which the entity did not receive prior notice. Please check this box if notice was not received.

If all of the above information is correct and you do not wish to make any changes, please select:

No Changes

If you need to make changes to the above information, please select:

Make Changes