

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003646

Entity Name: 163 CHELSEA CORP.

FILED  
Apr 14, 2008  
Secretary of State

**Current Principal Place of Business:**

168 CHELSEA LANE  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

720 SOUTH DIXIE HIGHWAY  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 11-3672431

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: SIMONSON, DANIEL  
Address: 168 CHELSEA LANE  
City-St-Zip: PLANTATION, FL 33324

Title: VTC ( ) Delete  
Name: SIMONSON, ARLEEN  
Address: 168 CHELSEA LANE  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARLEEN SIMONSON

VICE

04/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date