


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2004 08:00 AM
Secretary of State


DOCUMENT # P99000018628

1. Entity Name
 CHACE, INC.



Principal Place of Business 2 SOUTH BISCAYNE BLVD., SUITE 3400 ONE BISCAYNE TOWER MIAMI, FL 33131	Mailing Address 2 SOUTH BISCAYNE BLVD., SUITE 3400 ONE BISCAYNE TOWER MIAMI, FL 33131
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01232004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0903830	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ACEVEDO, CARLOS A
 1000 PARK OF COMMERCE BLVD
 HOMESTEAD, FL 33035

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSD ACEVEDO, CARLOS A 1000 PARK OF COMMERCE BLVD HOMESTEAD, FL 33035
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 03/08/04-80112-001 150.00

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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 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  Carlos A. Acevedo 3/1/04 305 230 2337

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #