

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

05 MAY - 1 AM 8:29

DOCUMENT # **S57924 (0)**
1. Corporation Name
CHASE HOLDINGS AND ADVISORY SERVICES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: **4523 SW 64TH AVENUE MIAMI FL 33155**
Mailing Address: **4523 SW 64TH AVENUE MIAMI FL 33155**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/04/1991** 3a. Date of Last Report: **05/11/1994**
4. FEI Number: **65-0266462** Applied For: Not Applicable:
5. Certificate of Status Cleared: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 2a. Mailing Address
21. State Apt. # etc.: 26. State Apt. # etc.
22. City & State: 27. City & State
23. Zip: Country: 28. Zip: Country:
24. 25. 29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~ANDREW SERVICE CORPORATION OF FLORIDA
C/O BYRON L. SPARBER
1401 BRICKELL AVE
MIAMI FL 33121~~

81. Name: **RONALD S. CHASE**
82. Street Address (P.O. Box Number is Not Acceptable): **4523 SW 64 AVE**
83. City: **Miami** 85. Zip Code: **33155**
84. State: **FL**

11. Pursuant to the provisions of Sections 607.0402 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0905, Florida Statutes.

SIGNATURE

Ronald S. Chase

4-28-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS, AND DIRECTORS IN 12

NAME: **DPS CHASE, RONALD S. 4523 SW 64TH AVENUE MIAMI FL**

1. NAME: Change Addition
2. NAME: Change Addition
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13. NAME: Change Addition
14. NAME: Change Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that it is true and correct for the information stated in this form. I further certify that the information is complete on this annual report or supplemental annual report as required and that my signature shall have the same legal effect as if made under oath. That I am not 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 on the list of officers or directors of the corporation with an address.

SIGNATURE:

Ronald Chase

4-28-95

305-665-0763