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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S57979

(4)

CHARTMED INTERNATIONAL CO., INC.

FILED
May 01 1997 8:00am
Secretary of State

Principal Flac 7215 SW 132N MIAMI FL 3318	D CT.	Mailing Address 7270 N.W. 12 ST. SUITE 340 MIAMI FL 33128-1928							
US		U\$				3. Date Incorporated or Qualified 06/04/1991		te of Last Ro 2/1996	eport
2. Principal F	lace of Bus≝ess	26. Mailing Address				4. FEI Number 65-0266496		<b></b>	plied For t Applicable
Suite Apt	#, etc	Suite, Apt #, etc.	<del>                                     </del>		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Sta		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	
Z(p 24	Gountry 25	Zip 29	30 Cc	ountry	,	This corporation has liability for it     Florida Statutes	ntangible Yes		199.032,
b	<ol><li>Name and Address of Cur</li></ol>	rent Registered Agent				10. Name and Address of New Reg	Istered A	gent	
DEL	VALLE, MANUEL R.			81	Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
t .	) N.W. 12 ST. FE 340			82	Street Addr	ress (P.O. Box Number is Not Acceptab	le)		
1	MI FL 33126-1928			83			· · · · · ·		
				84	City		FL	85 Zip (	Code
SIGNATURE	Signation, hyped or promised name of registered		iO7E: Registe	red Age		poration submits this statement for the plion's board of directors. I hereby accept as when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE		
TITLE	DPST DELETE			13.		ADDITIONS/OFFAIGLS TO OFFIC	LIIO AIIO	Change	Addition
NAME	SALCEDO, RODRIGO	beer re	1	NAME	ļ			CT) Olivingo	
STREET ADDRESS	LOS COPIHUES 2884 #301		•		ADDRESS				
C+TY - \$1 - Z+P	SANTIAGO, CHILE			CITY S					
TILE		DELETE		TITLE				Change	Addition
NAME			2.2	NAME					
STREET ADDRESS	•		2.3	STREET	ADDRESS				
CITY S1-7IP		Brieff		CITY-	ST-ZIP			M	August.
l tdif		DELETE:		TITLE	}			Change	Addition
NAME Carry Laborator				NAME					;
STREET ADDRESS					ADDRESS				
CHY-S1-ZIF	,	DELETE		CITY-S	51 - ZIP			Change	Addition
NAME			1	NAME				Sina-19-	
STREET ADDRESS			i i		ADDRESS				
CHY-ST-ZiP			- 1	CITY-S	· · · · · · · · · · · · · · · · · · ·				
III_E		☐ DELETE		TOLE		·		Change	Addition
NAME.			5.2	NAME	1				i
STREET AUDRESS			53	STREET	ADDRESS				
CHY-ST-Z01			54	CITY-5	ST-ZIP				
241.5	· · · · · · · · · · · · · · · · · · ·	DCLETE		TITLE				Change	Addition

SIGNATURE:

14. I do hereby certify that the informal information indicated on this arrival I am an officer or director of the coappears in Block 12 or Block 13.2 o

NAME

STREET ACCRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING DEFI

Rodrigo Salcedo

6.3 STREET ADDRESS

plied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the properties are under carried and accurate and that my signature shall have the same legal effect as if made under oath; that it receives or hustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name

6.4 CITY - ST - ZIP

4-21-97

(305) 477-2284

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