

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90231 037 ****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 737748

1. Corporation Name

CHRIS HAVEN, INC.

Principal Place of Business

729 RIDGE ROAD
LANTANA FL 33462
US

Mailing Address

729 RIDGE ROAD
LANTANA FL 33462



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

01/06/1977

4. FEI Number

58-9249243

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

TECK SENG NG
729 RIDGE RD
LANTANA FL 33462

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME SENG NG TEC
STREET ADDRESS 729 RIDGE RD, #6
CITY-ST-ZIP LANTANA FL 33462
☒ DELETE
NAME IN SPELLING
LAST NAME
ERROR

TITLE DV
NAME JOHNSON, SHIRLEY
STREET ADDRESS 729 RIDGE RD, #1
CITY-ST-ZIP LANTANA FL 33462
☐ DELETE

TITLE DTS
NAME TEC SENG NG
STREET ADDRESS 729 RIDGE RD 6
CITY-ST-ZIP LANTANA FL
☒ DELETE

TITLE DTS
NAME BISSON, ANDY
STREET ADDRESS 729 RIDGE RD, #5
CITY-ST-ZIP LANTANA FL 33462
☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME TECK SENG NG
1.3 STREET ADDRESS 729 RIDGE RD - #6
1.4 CITY-ST-ZIP LANTANA FL 33462
☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE DTS
4.2 NAME BISSON ANDY
4.3 STREET ADDRESS 729 RIDGE RD #5
4.4 CITY-ST-ZIP LANTANA FL 33462
☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/99

Date

(813) 547-9986

Daytime Phone #

CR2E037 (1/98)