

NOT FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 737748

Entity Name

CHRIS HAVEN, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAY 13 AM 11:48

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

729 RIDGE RD

729 RIDGE ROAD

City & State

City & State

LANTANA, FLORIDA

LANTANA, FLORIDA

Zip

Country

Zip

Country

33462

US

33462

US

4. FEI Number

58-9249243

Applied For:

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MARIA C DITULLIO

Street Address (P.O. Box Number is Not Accepted)

729 RIDGE ROAD #3

City

LANTANA

FL

Zip Code

33462

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

January 1, May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP (DIRECTOR) DITULLIO MARIA C 729 RIDGE ROAD #3 LANTANA FL 33462	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200008604842 10/28/02--01024--016 **\$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PV (DIRECTOR) BISBON, ANDY 729 RIDGE ROAD #5 LANTANA FL 33462	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200008604842 05/13/03--01023--005 **\$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT'S (DIRECTOR) DOMINGUEZ ROBERTO 729 RIDGE RD, #4 LANTANA, FL 33462	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

MARIA C DITULLIO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)