

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000127020

**Entity Name:** CHISELED BODZ, INC.

**Current Principal Place of Business:**

9625 WEST SAMPLE ROAD  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

P.O. BOX 9537  
CORAL SPRINGS, FL 33075

**FEI Number:** 22-3944164

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHARLES, ELIOT H  
3990 NW 114TH AVE.  
CORAL SPRINGS, FL 33065 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DPVTS  
Name CHARLES, ELIOT H  
Address 3990 NW 114TH AVE.  
City-State-Zip: CORAL SPRINGS FL 33065

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ELIOT H CHARLES

**PRESIDENT**

**04/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date