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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 456536

(2)

1997

CHIP-ETH CORP

FILED May 06 1997 8:00am Secretary of State

		4434 N) Address BAY RD BEACH FL 33140-2	2857		· · · · · · · · · · · · · · · · · · ·		BIOLO BIOLO A Barrio Branco		
							3. Date incorporated or Qualified 07/09/1974		ate of Last R 24/1996	eport
2. Principal F	Place of Business	2a, Ma	iling Address				4. FEI Number 59-1548820	. I., .,	· · · · · · · · · · · · · · · · · · ·	oplied For of Applicable
Suite Ant	#. etc.		te, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	
City & Sta	le		/ & State				6. Election Campaign Financing			May Be
23		28					Trust Fund Contribution		Added	to Fees
7iρ []	Country	Zip		_	ıntry	•	8. This corporation has liability for			, 199.032,
24	25 9 Name and Address of Curre	29 ant Registere	d Agent	30	Т		Florida Statutes 10. Name and Address of New Re	Yes [
REF	RKOWITZ, ABBEY				81	Name	10.			
4434 N BAY RD					82	Street Add	ress (P.O. Box Number is Not Acceptable)			
MLA	MI BEACH FL 33140				Ш				···-	
					83					
					84	City		FL	85 Zip (Code
office or agent. I a SIGNATURE	registered agent, or both, in the Sta am familiar with, and accept the obli- Bignature typed or punted name of registered a	igations of, Se	ction 607,0505, F	iorida Sta	10105	S.	poration submits this statement for the jation's board of directors. I hereby acce	pt the app	ointment as	registered
12.		ND DIRECTO	****	13.	a Age	att Bigliature rech	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	D		DELETE	1.1 T	TLE	<u> </u>			Change	Addition
NAME	BERKOWITZ, MURRAY			1.2 N	AME					
STREET ADDRESS	4300 N MERIDIAN AVE MIAMI BCH, FL 00000			1		ADDRESS				
CHY-ST-ZIP TITLE	D MIAMI DON, FL 0000		DELETE	2.1 7	ITY - S	7-ZIP			Change	Addition
NAME	BERKOWITZ, SHIRLEY		Optice	2.2 6					Lan Ollarigo	
STREET ADDRESS	4300 N MERIDIAN AVE			1		ADORESS				
CITY-ST-ZIF	MIAMI BCH, FL 00000			2.41	CITY - S	ST-ZIP				
TITLE	SVD		DELETE	3.1 T		ļ			Change	☐ Addition
NAME OFFICE ADDRESS	BERKOWITZ, ABBEY 4300 N MERIDIAN AVENUE			3.2 M		1000000				
STREET ADDRESS	MIAMI BCH, FL 00000			- 1		ADDRESS ST-ZIP				
TITLE			DELETE	4.1 T					Change	Addition
NAME				4.21	NAME	ŀ				
STREET ADDRESS				4.3 5	TREET	ADDRESS				
CITY - ST - ZIP			T DELETE		ITY-S	1-21P			Change	Addiso
TITLE NAME			DELETE	5.17 5.28	etle Iamé	}			CT CHAIRS	Addition
STREET ADDRESS						ADORESS				
CITY-ST-ZIP					ITY-S	- 1				
TITLE			DELETE	6.1 T					Change	Addition
NAME				6.2 N	AME	-				
STREET ADORESS				6.3 5	TREET	ADDRESS	•			
CHY-ST-ZIP	l			6.4 0	ITY - S	T-ZIP				

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or order attackment with an address.