

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **645797** (2)
1. Corporation Name
CHARTERED INVESTMENT RESEARCH CORPORATION



Principal Place of Business	Mailing Address
777 NW 72ND AVE #2 J14 MIAMI FL 33126	777 NW 72ND AVE #2 J14 MIAMI FL 33126

3. Date Incorporated or Qualified 11/20/1979		3a. Date of Last Report 06/20/1995	
4. FEI Number 59-1953925		Applied For	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

SATULOFF, MARSHA STEINER
460 W. DILIDO DR.
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Slings are typed or printed on the following days: 1 and 3 for all shifts.

THE Hesperian Agency is a full-service advertising and public relations firm.

CASE

12 OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	STD	<input type="checkbox"/> DELETE
NAME	SATULOFF, MARSHA	
STREET ADDRESS	460 W. DILIDO DR.	
CITY - ST - ZIP	MIAMI BEACH FL	

CITY ST-ZIP	FIRST LAST-MIDDLE	<input type="checkbox"/> DELETE
TITLE		
NAME		
STREET ADDRESS		
CITY ST-ZIP		

TITLE	<input type="checkbox"/> DEFER
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 checked, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/98

305-261-2548

CB2E034 (12/95)