## 2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT#719062** 

Entity Name: CHIPPER, INC.

지 FILED Jul 14, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1040 CRYSTAL LAKE DR. POMPANO BCH., FL 33064 US

Current Mailing Address: New Mailing Address:

1040 CRYSTAL LAKE DR. POMPANO BCH., FL 33064 US

FEI Number: 65-0132258 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

ALBUQUERQUE, MARIA C
1040 CRYSTAL LAKE DR.
POMPANO BCH., FL 33064 US
ALBUQUERQUE, JURANDIR
1040 CRYSTAL LAKE DR. #3
POMPANO BCH., FL 33064 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: JURANDIR ALBUQUERQUE 07/14/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

POMPANO BCH., FL 33064

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

POMPANO BCH., FL 33064

Title: PTD () Delete Title: PTD (X) Change () Addition Name: ALBUQUERQUE, MARIA Name: ALBUQUERQUE, JURANDIR Address: 1040 CRYSTAL LAKE DR, #3 City-St-Zip: POMPANO BCH., FL 33064 City-St-Zip: POMPANO BCH., FL 33064

Title: VSD () Delete Title: VSD (X) Change ( ) Addition ALMEIDA, MARIA M Name: HAASE, DEBORAH K Name: Address: 1040 CRYSTAL LAKE DR. #1 Address: 3062 RIVERSIDE DRIVE #F2 City-St-Zip: POMPANO BCH., FL 33064 City-St-Zip: CORAL SPRINGS, FL 33065

Title: TD () Delete Title: TD (X) Change () Addition Name: NOGUEIRA, ANA C Name: CABEZAS, MIGUEL A Address: 1040 CRYSTAL LAKE DR, #1

Title: S () Delete Title: S (X) Change () Addition Name: HAASE, DEBORAH K Name: PICHARDO, NANCY

Address: 3062 RIVERSIDE DRIVE #F2 Address: 1040 CRYSTAL LAKE DR. #4
City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: POMPANO BEACH, FL 33064

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: JURANDIR ALBUQUERQUE PTD 07/14/2005