

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED

95 MAY -1 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 729840 (9)
1. Corporation Name
CHALET EAST CONDOMINIUM, INC.

Principal Place of Business Mailing Address
**300 WEST 74TH PLACE
STE 318
HIALEAH FL 33014
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/24/1974	3a. Date of Last Report 04/26/1994
4. FEI Number 59-1702597	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. Zip Country	29. Zip Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**SIMOSA, JORGE
300 WEST 74TH PLACE
STE 305
HIALEAH FL 33014**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when constituting) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	VP
NAME	GARRIDO, LUIS
STREET ADDRESS	300 W 74TH PL, 313
CITY - ST - ZIP	HIALEAH FL
TITLE	T
NAME	SIMOSA, JORGE
STREET ADDRESS	300 W 74TH PL, 305
CITY - ST - ZIP	HIALEAH FL
TITLE	S
NAME	GREEN, MILTON
STREET ADDRESS	300 W 74TH PL, 204
CITY - ST - ZIP	HIALEAH FL
TITLE	P
NAME	RIZO, JULIAN
STREET ADDRESS	300 W 74TH PL APT 108
CITY - ST - ZIP	HIALEAH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Garrido, Luis	
1.3 STREET ADDRESS	300 W. 74 PL, 313	
1.4 CITY - ST - ZIP	Hialeah, FL. 33014	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Jose R. Perez	
3.3 STREET ADDRESS	300 W. 74 PL, # 213	
3.4 CITY - ST - ZIP	Hialeah, FL. 33014	
4.1 TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Beatriz Gonzalez	
4.3 STREET ADDRESS	300 W. 74 PL. # 217	
4.4 CITY - ST - ZIP	Hialeah, FL. 33014	
5.1 TITLE	director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Jesus Yebra	
5.3 STREET ADDRESS	300 W. 74 PL, # 214	
5.4 CITY - ST - ZIP	Hialeah, FL. 33014	
6.1 TITLE	director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Leopoldo Machin	
6.3 STREET ADDRESS	300 W. 74 PL. # 109	
6.4 CITY - ST - ZIP	Hialeah, FL. 33014	

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 110.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jorge Simosa* - JORGE SIMOSA Date: 04/26/95 Telephone # 593-0642
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR