

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003052

Entity Name: CHAVES PROPERTIES, INC.

FILED
Jan 13, 2004
Secretary of State

Current Principal Place of Business:

C/O KESTREL SA., PAUSILIPPE
CH. DES TROIS PORTES 11
2000 NEUCHATEL, SWITZERLAND,

New Principal Place of Business:

C/O KESTREL SA., PAUSILIPPE
506 LOUISA STREET
KEY WEST, FL 33040

Current Mailing Address:

506 LOUISA ST
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 52-2323274 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRELLY, GREGORY G
CATALFOMO & FARRELLY
506 LOUISA STREET
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: EMERY, MAURICE
Address: SOUS-LES-CHATAIGNIERS
City-St-Zip: 2028 VAUMARCUS,

Title: VCS () Delete
Name: SCREECH, STEPHEN
Address: CHEMIN DE NOTRE-DAME 2
City-St-Zip: 2013 COLOMBIER,

Title: D () Delete
Name: RUSHBROOKE, PHILIP
Address: RTE DES PINS 9
City-St-Zip: 2035 CORCELLES, SWITZERLAND,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN SCREECH

V

01/13/2004

Electronic Signature of Signing Officer or Director

_____ Date