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**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F24720

(7)

CHEROSA, INC.

**FILED** Apr 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							KO 3115 OLDEK MSAKE YADID ERBOT	ABII ALBII ALBI	I BIBAL DIDEL DI	011 01 <b>6</b> (1 1061
% CHASE EN ONE COMME HARTFORD (	RCIAL PLAZA, ATTN: J. KORZENIK	% Chase enterprises One commercial plaza. Attn: J. Korzenik Hartford Ct 06103				DO NOT WRITE IN THIS SPACE				
							orporated or Qualified	j e		
6 Dringing D	loop of Province					04/10				
<del></del>	lace of Business	2a. Mailing A	Address			4. FEI Num			<del></del>	pplied For
Suite, Apt.	# atc	26				06-1	041568			ot Applicable
	#, etc.	Suite, Ap	it.₩, etc.			5. Certifica	te of Status Desired			Additional
City & State	Α	[27] City & St.	alo			<del>                                     </del>		<del></del>		equired
23	•		ale				Campaign Financing			May Be
Zip	Country	28 Z <sub>ID</sub>	Z <sub>IP</sub> Country			100000000000000000000000000000000000000				
24	25	l,	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No				
	9. Name and Address of Curren	29  nt Registered Age		<del>, , , , , , , , , , , , , , , , , , , </del>			nd Address of New F			
ST	LOUIS, ROLAND R JR			81	Name	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
ST. LOUIS, GUERRA & AUSLANDER, P.A					82 Street Address (P.O. Box Number is Not Acceptable)					
20	1 S. BISCAYNE BLVD. MIAMI CN	IT10TH FL	10TH FI		Street Ad	aress (P.O. Box N	number is Not Accept	able)		
	AMI FL 33131-4325	,		83						
				84	City			FL	<b>85</b> Zip	Code
ayent i a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	2 and 607 1508, F of Elorida, Such calions of, Section 6	lorida Statutes hange was au 307.0505, Flori	, the above thorized by da Statute	e-named co y the corpor s.	rporation submits ation's board of d	this statement for the directors. I hereby acc	purpose of ept the app	changing i ointment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered age	ent and total a good and ha	(NOTE	Bogislaved Ass		uired when reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE		
12.	OFFICERS AND		(NOTE:	13.	an agrature req		S/CHANGES TO OFF		DIRECTO	3S IN 12
TITLE	EVSD		DELETE	1.1 TITLE			iorona miozo no oni	102/10/11/0	Change	Addition
NAME	CHASE, CHERLY A			1:2 NAME		CHASE,	CHERYL A.		_ •	i
STREET ADDRESS	ONE COMMERCIAL PLAZA			1.3 STREET	ADDRESS	-				
CITY-ST-ZIP	HARTFORD CT			1.4 CITY-S	IT- ZIP					
TITLE	PTD		DELETE	2.1 TITLE					☐ Change	☐ Addition
RAME	CHASE, ARNOLD L.			22 NAME						
STREET ADDRESS	ONE COMMERCIAL PLAZA			2.3 STREET	ADDRESS					
CITY-ST-ZIP	HARTFORD CT			2 4 CITY-1	ST-ZIP		* •	** **		
TITLE			DELETE	31 TITLE			<del></del>		Change	Addition
NAME				32 NAME						
STREET ADDRESS				3 3 STREET	ADDRESS					
CITY-ST-ZIP			1 60.000	3 4. CITY-5	ST-ZIP					
TITLE		L	J DELETE	4.1 TITLE					Change	☐ Addition
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		_	ן טנונונ	5.1 TITLE					Change	☐ Addition
NAME OTDEET ADDRESS				5.2 NAME						
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		L	ן טונניונ	6.1 TITLE	1				L_ Change	☐ Addition
NAME STREET ADDRESS				6.2 NAME	4000000					
				6.3 STREET						
CITY-ST-ZIP	artifu that the information counted wi	ith this films does	not qualify for	6.4 CITY-S		e Pastion 110 07/	OVA Florido Statuto	16.0	-A'6 - AL - 6 4L -	16

Thereby certify that the information supplied with this filling 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 on an attachment with an address

3/27/98 860/549-1674