FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F33021

THE CHICKOLAR CORPORATION OF VERO

Principal Place	e of Business	Mailing Address					
366 33RD AVE. SW 366 33RD AVE. SW							
VERO BCH FL 32968 VERO BCH FL 32968					DO NOT WRITE IN THIS SPACE		
		•			3. Date Incorporated or Qualifed		
					05/01/1981		
Principal Place of Business 2a. Mailing Address					4. FEI Number	Apı	plied For
21	26				59-2093857	No	t Applicable
Suite, Apt.	te, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	,
22 27			<u> </u>			Fee Re	
City & State - City & State -					6. Election Campaign Financing	\$5.00	· · · · · · · · · · · · · · · · · · ·
			Country		Trust Fund Contribution	Added to	o rees
Zip		<u> </u>	Country	1	This corporation owes the current year Personal Property Tax.		□No
24	9. Name and Address of Curre				10. Name and Address of New Registere		
	o. Italia dia nadios di osi	THE PROPERTY OF THE PROPERTY O	81	Name			
CHISHOLM, SCOTT				0 141	(D.O. B. Nimb. in Net Americal		
366 33RD AVE, SW			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
VERO BEACH FL 32960			83				
			84	City		. 85 Zip C	'orte
			1			L	
office or r	egistered agent, or both, in the Stat	502 and 607.1508; Florida Statutes, to e of Florida. Such change was autho pations of, Section 607.0505, Florida	rized by	the comporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its pointment as rec	registered ? gistered
SIGNATURE							
	Signature, typed or printed name of registered as	· · · · · · · · · · · · · · · · · · ·		nt signature requir	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DS IN 12
12.	STD OFFICERS A	ND DIRECTORS	13. 1,1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	CHISHOLM, BRENDA	_	1.2 NAME				
NAME	366 33RD AE, SW			TADDRESS			
STREET ADDRESS	MEDIO BOLL EL		1.4 CITY-S				ļ
TITLE	PD PD	DELETE 2.11		31-ZIP		Change	Addition
NAME	CHISHOLM, SCOTT D	_	2.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			2. 4 CITY-5		-		ļ
TITLE			3.1 TITLE			Change	☐ Addition
NAME	3.2 N		3.2 NAME	1			
STREET ADDRESS			3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP			
TITLE	☐ DELETE 4.1 TO		4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADORESS			ł
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP			
TITLE			5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				·
STREET ADDRESS				TADDRESS			į
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		C. 0222.2	6.1 TITLE			☐ Change	Addition
NOTE:			6.2 NAME		•		-
CTREET APPROPESS			6.3 STREE	TADDRESS			

CITY-ST-ZIP **** 14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

6.4 CITY-ST-ZIP

STREET ADDRESS

561-778-0661 Daytime Phone #

FILED

May 01, 1999 8:00 am Secretary of State

05-01-1999 90056 012 ***150.00