## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 08:00 AM
Secretary of State

ANNUAL REPORT				May 01, 200 / 08:00		
DOCUMENT # F9600001019  1. Entity Name  CHEST AV INC.					Secretary of S	tat
RUBY I	JESDAY, INC.					
Principal Place	ce of Business M	lailing Address				
		150 WEST CHURCH AVE				
MARYVILLE,	TN 37801 US I	MARYVILLE, TN 37801 US				
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. [	OO NOT WRITE II	N THIS SPAC	CE 🔑	4. FEI Number	Applied Fo	
			,	63-0475239	Not Applica	able
,	3 E7 P	2,	1 - 1 - 1 E + 1 *	5. Certificate of Status	Desired Fee Required	
	6. Name and Address of Current Regis	tered Agent				
	PORATION SYSTEM, INC.			DO NO	T WRITE	
1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324			i			
PLANTATION, PL 33324				MICIN THIS	5 SPACE	,
			2.4			
	named entity submits this statement for the p	ourpose of changing its registere	ed office or registe	red agent, or both, in the S	State of Florida. I am familiar with, and acc	ept
the obliga	tions of registered agent.					
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered	d Agent signature required	d when reinstating)	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	<ol> <li>Election Campaign Finan Trust Fund Contribution.</li> </ol>		.00 May Be led to Fees		
10.	OFFICERS AND DIREC	CTORS	,		*	
TITLE NAME	PCEO BEALL, SAMUEL E III		Sale Contin	Court Long Best	the state of the state of the state of	. !
STREET ADDRESS	150 WEST CHURCH AVE		<b>!</b> '			
CITY-ST-ZIP	MARYVILLE, TN 37801			mile of the control	The first the second second	, .
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CITY-ST-ZIP	MARYVILLE, TN 37801			. •	4.4	·
TITLE NAME	S SCARLETT, AMAY		, , , , , , , , , , , , , , , , , , ,	A Section of the Section		
STREET ADDRESS	150 WEST CHURCH AVE			_ ` _		
CITY-ST-ZIP	MARYVILLE, TN 37801		***	DO NO	· · · · · · · · · · · · · · · · · · ·	٠,,
TITLE NAME	VPC SOUTHALL, FRANKLIN E JR			IN THIS	SSPACE	
STREET ADDRESS	150 WEST CHURCH AVE		34, 1 40	the second second	per and and the second arrange	
CITY-ST-ZIP	MARYVILLE, TN 37801		, i	. •		
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STREET ADDRESS			:	nt.	U00000749722   18/07-20033-023   150.	Digital Control
CITY-ST-ZIP			t in	100 July 100	s that it is initially become begins	, USA

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

**SIGNATURE:** 

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #