

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED  
AND  
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**.95 MAY - 1 PM 4: 21**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**DOCUMENT # G65352 (8)**

**1. Corporation Name  
CHICO'S BATTERY SALES, INC.**

**Principal Place of Business Mailing Address  
7780 NW 56TH ST. 7780 NW 56TH ST.  
MIAMI FL 33168-3522 MIAMI FL 33186-3522**

DO NOT WRITE IN THIS SPACE.

**3. Date Incorporated or Qualified 10/18/1983  
3a. Date of Last Report 03/11/1984**

<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>		<b>4. FEI Number</b>		<b>Applied For</b>	
21		26		59-2619542		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<b>5. Certificate of Status Desired</b>		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		<b>6. Election Campaign Financing Trust Fund Contribution</b>		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		<b>8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		24		25	
Zip		Country		29		30	

<b>9. Name and Address of Current Registered Agent</b>				<b>10. Name and Address of New Registered Agent</b>			
<b>COAST, JOHN J. 7780 S.W. 28TH STREET MIAMI FL 33155</b>				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

**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** \_\_\_\_\_ **DATE** \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

<b>12. OFFICERS AND DIRECTORS</b>		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>	
<b>TITLE</b>	<b>PD</b>	<b>1 1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	<b>COSTA, JOHN J.</b>	<b>12 NAME</b>	
<b>STREET ADDRESS</b>	<b>7880 SW 28TH ST.</b>	<b>13 STREET ADDRESS</b>	<b>600001488366</b>
<b>CITY - ST - ZIP</b>	<b>MIAMI FL</b>	<b>14 CITY - ST - ZIP</b>	<b>-05/16/95--01023--006</b>
<b>TITLE</b>	<b>V</b>	<b>21 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	<b>COSTA, OLGA R.</b>	<b>22 NAME</b>	
<b>STREET ADDRESS</b>	<b>7880 SW 28TH ST.</b>	<b>23 STREET ADDRESS</b>	<b>****200.00</b>
<b>CITY - ST - ZIP</b>	<b>MIAMI FL</b>	<b>24 CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b>	<b>S</b>	<b>31 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	<b>COSTA, CESAR COSTA</b>	<b>32 NAME</b>	
<b>STREET ADDRESS</b>	<b>7880 SW 28TH ST.</b>	<b>33 STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	<b>MIAMI FL</b>	<b>34 CITY - ST - ZIP</b>	
<b>TITLE</b>		<b>41 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>42 NAME</b>	
<b>STREET ADDRESS</b>		<b>43 STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>		<b>44 CITY - ST - ZIP</b>	
<b>TITLE</b>		<b>51 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>52 NAME</b>	
<b>STREET ADDRESS</b>		<b>53 STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>		<b>54 CITY - ST - ZIP</b>	
<b>TITLE</b>		<b>61 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>62 NAME</b>	
<b>STREET ADDRESS</b>		<b>63 STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>		<b>64 CITY - ST - ZIP</b>	

**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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 (changed, or on an attachment with the filing).**

**SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**305-593-1961**  
*[Signature]*