

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **H60573** (3)
1. Corporation Name
CHOF YAMM, INC.

Principal Place of Business Mailing Address
% 4041 COLLINS AVENUE **% 4041 COLLINS AVENUE**
MIAMI BEACH FL 33140 **MIAMI BEACH FL 33140**

DO NOT WRITE IN THIS SPACE

3. Date Recorporated or 10-advised **06/06/1985** 3a. Date of Last Report **04/28/1994**
4. FEI Number **59-2659833** Approved For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing / Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**
8. This corporation has liability for attorney's fees under the Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 26
22 27
23 28
24 29 30

9. Name and Address of Current Registered Agent

FURST, MARTIN
4041 COLLINS AVENUE
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 State

11. I, the undersigned, do hereby certify that the information furnished on this filing is substantially true and correct, and that I am a duly qualified officer or registered agent of the corporation named herein, and that I am authorized to execute this statement for the purpose of changing the registered office or registered agent of the corporation named herein. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent of the corporation named herein and accept the responsibility for the corporation's compliance with the Florida Statutes.

SIGNATURE

Signature of Officer or Registered Agent

Signature of Registered Agent

12. OFFICERS AND DIRECTORS		13. ADDITIONAL NAMES TO BE LISTED FOR THE ANNUAL REPORT	
NAME	ADDRESS	NAME	ADDRESS
PD BERKOWITZ, MURRAY 4434 N BAY RD MIAMI BEACH FL			
STD BERKOWITZ, ABBEY 4434 N BAY RD. MIAMI BEACH FL			

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SIGNATURE:

By Abbey Berkowitz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/95

531-5771