

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J61140 (6)

1. Corporation Name

CHANTELLE, INC.



Principal Place of Business

Mailing Address

6100 GLADES ROAD, SUITE 213
BOCA RATON FL 33434

6100 GLADES ROAD, SUITE 213
BOCA RATON FL 33434

3. Date Incorporated or Qualified
03/10/1987

3a. Date of Last Report
08/08/1995

2. Principal Place of Business

21 7050 W. PALMETTO PK RD

2a. Mailing Address

26 7050 W. PALMETTO PK RD

4. FEI Number
65-0001396

Applied For
Not Applicable

Suite, Apt. #, etc.

22 SUITE 38

Suite, Apt. #, etc.

27 SUITE 38

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23

City & State

28

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

24 33433

Country

Zip

29 33433

Country

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TEITELBAUM, JOEL
6100 GLADES ROAD, SUITE 213
BOCA RATON FL 33434

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

7050 W. PALMETTO PARK RD

83 SUITE 38

84 City BOCA RATON

FL

85 Zip Code 33433

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

Signature of person in charge of the registered agent (and the Corporation)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME PTSD
STREET ADDRESS TEITELBAUM, JOEL
CITY - ST - ZIP 6100 GLADES ROAD, SUITE 213
BOCA RATON FL 33434

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

7050 W. PALMETTO PK RD, STE 38
BOCA RATON FL 33433

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

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 119.07(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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOEL TEITELBAUM

7/31/96

(56) 347-8700

Day/Even Phone #