

**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

**APPROVED  
AND  
FILED**

95 FEB 27 AM 12:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **K06838** (2)

1. Corporation Name  
**CHOMPTANK CORPORATION**

Principal Place of Business	Mailing Address
% GEORGE R. MORAITIS 915 MIDDLE RIVER DR. #506 FT. LAUDERDALE FL 33304-3500	% GEORGE R. MORAITIS 915 MIDDLE RIVER DR. #506 FT. LAUDERDALE FL 33304-3500

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>12/08/1987</b>	3a. Date of Last Report <b>03/07/1994</b>
4. FEI Number <b>65-0015699</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24 Country	25 Zip
29 City	30 Zip Code

9. Name and Address of Current Registered Agent  
**MORAITIS, GEORGE R.  
915 MIDDLE RIVER DR  
FT. LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

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 # applicable (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ROSELLO, GONZALO
STREET ADDRESS	915 MIDDLE RIVER DR.
CITY - ST - ZIP	FT. LAUDERDALE FL
TITLE	STD
NAME	ROSELLO, CARMELLA P.
STREET ADDRESS	915 MIDDLE RIVER DR
CITY - ST - ZIP	FT LAUDERDALE FL
TITLE	VD
NAME	ROSELLO, GONZALO
STREET ADDRESS	915 MIDDLE RIVER DR
CITY - ST - ZIP	FT LAUDERDALE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 199.032(b), 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 checked, or on an attachment with an address.

SIGNATURE: *Gonzalo Rosello* - Gonzalo Rosello 2/21/95 (305) 518-4163  
Gonzalo Rosello - President

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**DOCUMENT # K06838 (2)**

1. Corporation Name  
**CHOMPTANK CORPORATION**

Principal Place of Business  
**% GEORGE R. MORATIS  
915 MIDDLE RIVER DR. #508  
FT. LAUDERDALE FL 33304-3500**

Mailing Address  
**% GEORGE R. MORATIS  
915 MIDDLE RIVER DR. #508  
FT. LAUDERDALE FL 33304-3500**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

**12/08/1987**

3a. Date of Last Report

**03/07/1994**

4. FEI Number

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Applied 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**

9. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

**MORATIS, GEORGE R.  
915 MIDDLE RIVER DR  
FT. LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

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Zip Code

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, typed or printed name of registered agent need file if required)

(NOTE: Registered Agent designation required when substituted)

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DP

NAME

**ROSELLO, GONZALO**

STREET ADDRESS

**915 MIDDLE RIVER DR.**

CITY - ST - ZIP

**FT. LAUDERDALE FL**

1.1 TITLE

Change

Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE

STD

NAME

**ROSELLO, CARMELLA P.**

STREET ADDRESS

**915 MIDDLE RIVER DR**

CITY - ST - ZIP

**FT LAUDERDALE FL**

2.1 TITLE

Change

Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE

VD

NAME

**ROSELLO, GONZALO**

STREET ADDRESS

**915 MIDDLE RIVER DR**

CITY - ST - ZIP

**FT LAUDERDALE FL**

3.1 TITLE

Change

Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

Change

Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

Change

Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

Change

Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 Sections 110.07(2)(b), 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 197, Florida Statutes, and that my name appears in Block 12 or Block 13 if checked, or on an attachment with an address.

SIGNATURE: *X*

*G. Rosello - Gonzalo P. Rosello 3/21/95 (305) 968-4143*

(SIGNATURE AND PRINTED NAME OF PERSONS APPOINTED OR DIRECTOR)

**GONZALO ROSELLO - President**