FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K21662

(7)

CHEECH'S, INC.

Principal Place of Business 4510 N. OCEAN DR.

2. Principa Place of Business

SIGNATURE:

HOLLYWOOD FL 33019

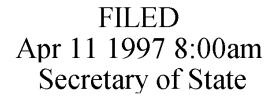
21

Mailing Address

SIGNATURE AND TYPED ON PRINTED NAME OF BIGNING OFFICER OF DIRECTOR

4510 N. OCEAN DR. HOLLYWOOD FL 33019-4105

2a. Mailing Address





3a. Date of Last Report

Applied For

Not Applicable

04/19/1996

3. Date Incorporated or Qualified

3-23-97

0126112

04/22/1988

65-0048684

4. FEI Number

Suite, Apt	#, etc	Suite, Apt. #, etc.			5. C	ertificate of Status Desire	d 🗆	\$8.75		
22 City & State	p	City & State				lastica Caracian Flance		Fee Re		
23	v	28			- 1	lection Campaign Financi rust Fund Contribution		\$5.00 Added to		
7(p)	Country 25	7 ip 3	Countr 0	ÿ	1	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
	9. Name and Address of Curren	t Registered Agent			10. N	ame and Address of Ne	w Registered	Agent		
JASC	ON, ERIC		81	Name						
HOLLYWOOD FL 33019				82 Street Address (P.O. Box Number is Not Acceptable)						
				83						
				City				85 Zip (Code	
				1		····,, . ····-, ··· ··, ··	FL	- 1 1		
11. Pursuant office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statutes of Florida, Such change was aut	, the abov horized b	re-named (v the corp	corporation s oration's boa	submits this statement for ard of directors. I hereby	the purpose of accept the apr	f changing its pointment as	s registered registered	
agent la	m familiar with, and account the obliga	ations of, Section 607.0505, Florid	da Statute	is.			_		}	
SIGNATURE	Stangare type for printed manner of epidemics and	nt and title ill applicable (NOTE: F	Janiela	ant pinester	required when rei	includion)	<u> 3-23</u>	- 47		
12.	OF ICERS AND		13.	eni signalure i		IDITIONS/CHANGES TO	OFFICERS AND	DIRECTOR	S IN 12	
litte	DPTS			1.1 TITLE				Change	Addition	
NAME	JASON, ERIC		1.2 NAME					`		
STREET ADDRESS	4510 N. OCEAN DR.			1.3 STREET ADDRESS					(
CHY-SL ZIP				1.4 CITY-ST-ZIP						
TOLE		DELETE	2.1 TITLE					Change	☐ Addition	
NAME			2.2 NAME]						
STREET ADDRESS			2.3 STREE	T ADDRESS						
CITY+S1 ZiP			2 4 CiTy-	ST-ZIP					[
TIBLE		DELETE	3.1 TITLE	7				☐ Change	Addition	
NAME	,		3.2 NAME							
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CHY ST 2H			3.4. CITY-	ST-ZIP		·····				
Title		☐ DELETE	4.1 TITLE					Change	Addition	
NAM:			4. 2 NAME	- 1					ļ	
STREET ADDRESS			B	T ADDRESS						
CGY - \$1 - 71P		T priete	4.4 CITY-	ST-ZIP				Obance	Addisor	
Ta ¹ LF		DELETE	5.1 TITLE	ł				Change	Addition	
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STREET ADDRESS			L	F ADDRESS					Ì	
CHY+S1-7IP Tota	. , , , , , , , , , , , , , , , , , , ,	DELETE	5.4 CITY - 6.1 TITLE	S1-ZIP				Change	Addition	
NAMÉ		() Order	6.1 MLE					C Avenda	, Mollion	
SUBJET AFORESS			1	T ADDRESS					ļ	
CHY-S1-7/F			6.3 STREE	1					ļ	
14. 1 do here!	y certify that the information supplied	d with this filing does not qualify	for the ex-	emption st	ated in Secti	on 119.07(3)(i), Florida S	tatutes. I furthe	r certify that	the	
rdomatio Lam an ol	m indicated on this annual report or s Hicer or director of the corporation or n Block 12 or Block 13 if changed, or	supplemental annual report is true the receiver or trustee empower	e and acc ed to exe	urate and	that my sign	ature shall have the same	e legal effect a	s if made und	der oath; that]	