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 APR 28 PM 6:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

DOCUMENT # L32451 (1)

1. Corporation Name
CHUMS, INC.

Principal Place of Business	Mailing Address
3702 DONALD AVE. KEY WEST FL 33040-4410	3702 DONALD AVE. KEY WEST FL 33040-4410

3. Date Incorporated or Qualified: 11/29/1989
3a. Date of Last Report: 03/08/1994
4. FEI Number: 65-0157858 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 335 Duval Street	26 C/o P.P. Norris, CPA 2832 N.E. 21st Court
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Key West, Florida	City & State 28 Ft. Lauderdale, Fla
Zip 24 33040 Country 25 Monroe	Zip 29 33305 Country 30 Broward

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 intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. **Name and Address of Current Registered Agent**

ITTAH, CHARLIE
3702 DONALD AVENUE
KEY WEST FL 33040-4410

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 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 and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1 1 TITLE	P/S ☐ Change ☒ Addition
NAME	ITTAH, CHARLES	1 2 NAME	
STREET ADDRESS	3702 DONALD AVENUE	1 3 STREET ADDRESS	
CITY ST ZIP	KEY WEST FL	1 4 CITY ST ZIP	
TITLE		2 1 TITLE	V/D ☐ Change ☒ Addition
NAME		2 2 NAME	D'Jamal, Shlomo
STREET ADDRESS		2 3 STREET ADDRESS	209 S. Atlantic Blvd
CITY ST ZIP		2 4 CITY ST ZIP	Ft. Lauderdale, Fla. 33316
TITLE		3 1 TITLE	☐ Change ☐ Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY ST ZIP		3 4 CITY ST ZIP	
TITLE		4 1 TITLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY ST ZIP		4 4 CITY ST ZIP	
TITLE		5 1 TITLE	☐ Change ☐ Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY ST ZIP		5 4 CITY ST ZIP	
TITLE		6 1 TITLE	☐ Change ☐ Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY ST ZIP		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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Charles Ittah 4/3/95 (305)294-7905
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

010047 CP