2003 FOR PROFIT CORPORATION

UN	IFORM I	BUSINESS	REPORT	r (UBR)	\boldsymbol{A}	pr 28, 2	2003_	8:00	U am
DOCUMENT # P0000012089 1. Entity Name CHAT CORPORATION					Secretary of State 04-28-2003 91430 047 ***158.75					
20800 N.E. 33 AVENTURA F US		2080 AVEN US	Ig Address D N.E. 32 PLACE ITURA FL 33180 Iling Address 3 B Comm	indore P	Lazo					
Suite, Apt.	#, etc.		e, Apt. #, etc.				CHECK HERE I	MAKING CH	HANGES	
City & Stat	mi, FLE	_	& State ami, FL	orida		4. FEI Numbe	er 65-0980488			plied For t Applicable
72ip 331	33 Coun	SA.	3133	Country U. S. A	.	5. Certificate	of Status Desired		.75 Add Required	
	6. Name and Ad	dress of Current Registere	ed Agent			7. Name and	Address of New Re	gistered Age	nt	
CORREA, 20800 N.I	Street A		P.O. Box Number Bill D	Javaas er is Not Acceletable) Av						
AVENTUR	RA FL 33180			Δ.ν	F 1	10 4				[
3				City	ا ز د	mi F	L	FL	Zip Code	133
the obligat	tions of registered age	ame of registered agent and title if app	co. Press	a 1		. <u>.</u>		- 2 4 - DATE		}
Afte	r May 1, 2003 Fee		i				ection Campaign Fina est Fund Contribution			May Be to Fees
10.		OFFICERS AND DIRECTO	RS	11,	**	ADDITIONS/	CHANGES TO OFFIC	CERS AND DII	RECTORS	IN :1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORREA, JAIME 20800 N.E. 32 PL AVENTURA FL 33		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	10 to	ouer U	argas DAV.	1pt No	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MiGuel 2900 Bir Micani	Vargas DAV! Apt N		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CTIC		<u></u>		Change	Addition
TITLE Name Street address " City-St-Zip			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	~				Change	Addition
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IITLE		1	☐ Delete	TITLE			***		Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP