

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91845 002 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000030950			90113649
1. Entity Name CHIN & ASSOCIATES, INC.			
Principal Place of Business 18646 NW 67 AVE HIALEAH, FL 33015		Mailing Address 18646 NW 67 AVE HIALEAH, FL 33015	
2. Principal Place of Business 6175 NW 153 2D ST		3. Mailing Address 6175 NW 153 2D ST	
Suite, Apt. #, etc. SUITE 301		Suite, Apt. #, etc. SUITE 301	
City & State MIAMI FL		City & State MIAMI FL	
Zip 33014		Zip 33014	
Country USA		Country USA	
4. FEI Number 65-1125294		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHIN, MAILYN 20101 SKOKIE DR. HIALEAH, FL 33015		7. Name and Address of New Registered Agent Name GLORIELA MARITZA PAEZ Street Address (P.O. Box Number is Not Acceptable) 3173 WEST 73 PLACE City HIALEAH FL Zip Code 33018	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Gloria M. Paez</i></u> DATE <u>4/25/03</u> (NOTE: Registered Agent signature required when submitting)			
FILE NOW! FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
PD CHIN, MAILYN 20101 SKOKIE DRIVE MIAMI, FL 33015		☐ Change ☐ Addition	
VT PAEZ, GLORIELA 3173 W 73 PL HIALEAH, FL 33018		☐ Change ☐ Addition	
V PAEZ, ELIAS 3173 W 73 PL HIALEAH, FL 33018		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ 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.			
SIGNATURE: <u><i>Gloria M. Paez</i></u>		Date <u>4/25/03</u> (305) 558-7008	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

CR2E034 (10/02)