

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000030950

FILED
Apr 29, 2003
Secretary of State

Entity Name: CHIN & ASSOCIATES, INC.

Current Principal Place of Business:

18646 NW 67 AVE
HIALEAH, FL 33015

New Principal Place of Business:

Current Mailing Address:

18646 NW 67 AVE
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 65-1125294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIN, MAILYN
20101 SKOKIE DR.
HIALEAH, FL 33015 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHIN, MAILYN
Address: 20101 SKOKIE DRIVE
City-St-Zip: MIAMI, FL 33015

Title: VT () Delete
Name: PAEZ, GLORIELA
Address: 3173 W 73 PL
City-St-Zip: HIALEAH, FL 33018

Title: V () Delete
Name: PAEZ, ELIAS
Address: 3173 W 73 PL
City-St-Zip: HIALEAH, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAILYN CHIN

PD

04/29/2003

Electronic Signature of Signing Officer or Director

Date