


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2007 8:00 am
Secretary of State

02-22-2007 90023 019 ***150.00

DOCUMENT # P00000057975					
1. Entity Name CHANEL ANDRE, INC.					
Principal Place of Business 3210 LOWSON BLVD DELRAY BEACH FL 33445			Mailing Address 3210 LOWSON BLVD DELRAY BEACH FL 33445		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1022283	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ANDRE, LAWRENCE 244 SE 7TH AVE DELRAY BEACH FL 33483			7. Name and Address of New Registered Agent Name: LAWRENCE ANDRE Street Address (P.O. Box Number is Not Acceptable): 3210 LOWSON BLVD DELRAY BEACH City: DELRAY BEACH FL Zip Code: 33445		
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 _____ (NOTE: Registered Agent signature required when necessary) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
1011 NAME STREET ADDRESS CITY ST ZIP	PTD ANDRE, ALAWRENCE L 244 SOUTHEAST 7TH AVENUE DELRAY BEACH FL 33483	<input type="checkbox"/> Delete	1111 NAME STREET ADDRESS CITY ST ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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>Lawrence Andre</u> 3/5/07 owner president SOI 6379340					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR LAWRENCE L ANDRE					