

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90308 011 ***150.00

DOCUMENT # P00000103044

1. Entity Name
CH & S, INC.



Principal Place of Business
**1101 BRICKELL AVENUE
SUITE 1100
MIAMI, FL 33131**

Mailing Address
**1101 BRICKELL AVENUE
SUITE 1100
MIAMI, FL 33131**

2. Principal Place of Business
**13249 SW 50 ST
Suite, Apt. #, etc.**

3. Mailing Address
**18646 NW 67 AVE
Suite, Apt. #, etc.**



☐ CHECK HERE IF MAKING CHANGES

City & State
Miramar

City & State
Miami Lakes

4. FEI Number
65-1051555

Applied For
☐ Not Applicable

Zip
33027

Country
Broward

Zip
33015

Country
Dade

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PENA, J. DAVID ESQ.
1101 BRICKELL AVENUE
SUITE 1100
MIAMI, FL 33131**

Name
JOSE F. CHAPMAN
Street Address (P.O. Box Number is Not Acceptable)
18646 NW 67 Ave

City
Miami Lakes **FL** Zip Code
33015

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

Jose Chapman

4/28/03

Signature, Title, and Address of registered agent and title if applicable.

(NOTE: Registered Agents signature required when reinstating.)

DATE

FILE NOV 2003 FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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
D. SANCHEZ, VIVIANA MARIA
1101 BRICKELL AVENUE, SUITE 1100
MIAMI, FL 33131

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ 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:

Viviana Sanchez

04-28-03 (305) 829-9510

Case

Daytime Phone #

CR2E034 (10/02)