


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 08, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000046600	
1. Entity Name CHA EMPLOYMENT SERVICES, INC.	

Principal Place of Business 1751 S.W. 8 STREET POMPAÑO BEACH, FL 33069	Mailing Address 1751 S.W. 8 STREET POMPAÑO BEACH, FL 33069
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DO NOT WRITE IN THIS SPACE



07012004 No Chg-P CR2E034 (10/03)

4. FEI Number 02-0598159	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
ROBERT A. BRANDT, P.A. 1110 BRICKELL AVENUE PH-1 MIAMI, FL 33131	

DO NOT WRITE
IN THIS SPACE

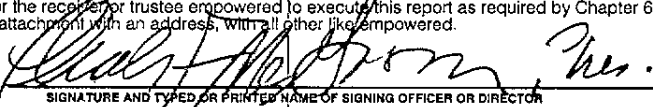
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when restateing)

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MAC GOWAN, CHARLES 1751 S.W. 8 STREET POMPAÑO BEACH, FL 33069	<p style="text-align: center; font-size: 18pt;">000000171748 09/08/04-80003-024 150.00</p> <p style="text-align: center; font-size: 24pt; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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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:  9/4/2004 (954) 785-3086

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #