

**2004 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**


FILED

04 JAN 23 AM 11:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P02000108323**

1. Entity Name  
**CHF-SERVICES CORPORATION**



Principal Place of Business  
**3114 COMMERCE PARKWAY  
MIRAMAR, FL 33025**

Mailing Address  
**3114 COMMERCE PARKWAY  
MIRAMAR, FL 33025**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number  
**75-3092802**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145**

7. Name and Address of New Registered Agent

Name: **Godwin W. Esthesimua**

Street Address (P.O. Box Number is Not Acceptable)  
**3114 Commerce Parkway  
Miramar, FL 33025**

City **FL** Zip Code

I, 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2003 Fee will be \$550.00  
Amended UBR IS \$61.26  
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 **PSTD**  Delete  
NAME **PADILLA, SEGUNDO R**  
STREET ADDRESS **3114 COMMERCE PARKWAY**  
CITY-ST-ZIP **MIRAMAR, FL 33025**

TITLE **C.D**  Change  Addition  
NAME **GODWIN W. ESTHESIMUA**  
STREET ADDRESS **3114 Commerce Parkway**  
CITY-ST-ZIP **MIRAMAR, FL, 33025**

TITLE **D**  Delete  
NAME **GORDONA, ROBERT L**  
STREET ADDRESS **1827 N. PINE ISLAND RD.**  
CITY-ST-ZIP **PLANTATION, FL 33322**

TITLE **700028660707**  Change  Addition  
STREET ADDRESS **02/12/04--01037--024 \*\*317.50**

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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: Godwin W. Esthesimua Chairwoman/CEO 12/22/03 305-586-1692  
DATE DAYTIME PHONE #

CFR20034 (10/02)