

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000019802

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: CHIMENE CORP

## Current Principal Place of Business:

8293 CHAMPIONS GATE BLVD  
CHAMPIONS GATE, FL 33896

## New Principal Place of Business:

8293 CHAMPIONS GATE BLVD  
CHAMPIONS GATE, FL 33896 US

## Current Mailing Address:

PO BOX 736  
LOUGHMAN, FL 33858

## New Mailing Address:

8293 CHAMPIONS GATE BLVD  
CHAMPIONS GATE, FL 33896 US

FEI Number: 42-1587548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEXAGON INTERNATIONAL, INC  
6205 LAKE WILSON RD  
SUITE C  
DAVENPORT, FL 33896 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: P ( ) Delete  
Name: BENZAKEN, JEAN-PAUL  
Address: 8293 CHAMPIONS GATE BLVD  
City-St-Zip: CHAMPIONS GATE, FL 33896 US

Title: V ( ) Delete  
Name: BENZAKEN, CORINNE  
Address: 8293 CHAMPIONS GATE BLVD  
City-St-Zip: CHAMPIONS GATE, FL 33896 US

Title: TS ( ) Delete  
Name: LE HELLEY, BERTRAND  
Address: 8293 CHAMPIONS GATE BLVD  
City-St-Zip: CHAMPIONS GATE, FL 33896 US

## 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: BERTRAND LE HELLEY

TS

04/30/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date