

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091172

Entity Name: CHAMBER SERVICES, INC.

FILED
Mar 08, 2004
Secretary of State

Current Principal Place of Business:

18350 NW 2 AVE
SUITE 600
MIAMI, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

18350 NW 2 AVE
SUITE 600
MIAMI, FL 33169 US

New Mailing Address:

FEI Number: 86-1084591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CUSON, R. TERRY
1300 NW 167TH STREET, SUITE 1
MIAMI, FL 33169 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,D () Delete
Name: CUSON, R. TERRY
Address: 18350 NW 2 AVE STE 600
City-St-Zip: MIAMI, FL 33169 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: CUSON, R. TERRY
Address: 1300 NW 167TH STREET, SUITE 1
City-St-Zip: MIAMI, FL 33169 US

Title: COO () Change (X) Addition
Name: RANSFORD, JOEL M
Address: 1300 NW 167TH STREET, SUITE 1
City-St-Zip: MIAMI, FL 33169

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: JOEL M. RANSFORD

COO

03/08/2004

Electronic Signature of Signing Officer or Director

_____ Date