FILED

Feb 25, 1999 8:00 am Secretary of State

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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

_,_PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCL	JMENT	#	P25467
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DOCUI	MENT # P25467				
1. Corporation					
CHS GH	OUP, INC.				(SEC) B1891 61811 81891 81811 (88)
					<u> </u>
Principal Place	e of Business	Mailing Address			
8525 NW 53 TE	RR	8525 NW 53 TERR #104		;	
#104 Miami FL 33166		MIAMI FL 33166		DO NOT WRITE IN THIS	SPACE
US	•	US		3. Date Incorporated or Qualifed	
				08/02/1989	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 410	W. COCOA BEACH CAUSEWAY	26 P.O. BOX 3	21239	23-2085413	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 COCO	a Beach, Fl	28 COCOA BEA		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Int	tangible ☑Yes ☐No
24 3293	1 25 BREVARD	29 32932	30 BREVARD	Personal Property Tax. 10 Name and Address of New Registered	
	9. Name and Address of Current	Registered Agent	81 Name		Agent
SMIT	TH. DONALD L JR			D. LEWIS SMITH, JR	
	NW 53 TERRACE		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	common
#104			83	HIO M. COCOR BEACH CAU	SEMH A
MIAN	AI FL 33166		• •	<u> </u>	
			84 City	COCOA BEACH FL	85 Zip Code 32931
<u> </u>	10 F COT 0500	CO7 1500 Florido State	the the charge gamed or	emeration submits this statement for the numose of	changing its registered
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	Florida. Such change was	authorized by the corpor	ation's board of directors. I hereby accept the appoi	ntment as registered
agent. I a	m familiar with, and accept the obligate	hs of, Section 607.0505 FI	orida Statutes.	3 - 3 - 6	6 7
SIGNATURE	Donald 9.	euy - T	E:Registerell Agent signature req	I - 4 - 9 1	<u>8</u>
	Signature, typed or printed name of registered agent a OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
III.	PD	☐ DELETE	1.1 TITLE	PC	Change Addition
NAME	SMITH, DONALD LEWIS, JR.		1.2 NAME	D. LEWIS SMITH, JR	
STREET ADDRESS	8401 NW 53 TERR. SUITE 116		1.3 STREET ADDRESS	410 W. COCOA BEACH CAUSI	ZWAY
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	COCOA BEACH, FL 32931	
TITLE		☐ DELETE	2.1 TITLE	1	☐ Change ☐ Addition
NAME			2.2 NAME	1	
STREET ADDRESS			2.3 STREET ADDRESS	1	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	;	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME	i	
STREET ADDRESS			3.3 STREET ADDRESS	!	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	•	☐ Change ☐ Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	i i	
CITY-ST-ZIP			4.4 CiTY-ST-ZIP	1	
TITLE		☐ DELETE	5.1 TITLE	i	☐ Change ☐ Addition
NAME			5.2 NAME	1	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	6.1 TITLE		□ cualide □ Vocinou
NAME			6.2 NAME		
L OTREET ARRESCO			6.3 STREET ADDRESS	•	

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an adviress, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

407) 783-0088