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

DOCUMENT # P40748 1. Corporation Name

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90125 046 ***150.00

CHRISM	IAT (TENN.) INC.					OLAN ALAN ALAN ALAN ALAN ALAN ALAN
Principal Place	e of Business	Mailing Address				BEBUT BERDE BERDE FLOOR FLOOR (1881)
808 THIRD STREET, SUITE C 808 THIRD STREET, SUITE C						
NEPTUNE BEACH FL 32233 NEPTUNE BEACH FL 32233					50 407 4/6/75 ***	THIC CDACE
					DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualifed 10/01/1992	
2 Principal D	Place of Business	2a. Mailing Address			4, FEI Number	Applied For
21 Principal P	igos di pusitioss	26			13-3375145	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc						\$8.75 Additional
22 27					Gertifcate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 мау Ве
23 28					Trust Fund Contribution	Added to Fees
Zip 322	Country	29 32266	Countr	y	8. This corporation owes the current ye	ear Intangible Yes No
24 322	9. Name and Address of Curre		30		Personal Property Tax 10. Name and Address of New Regis	
<u></u>			81	Name		
CORPORATION SERVICE COMPANY			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
1201 HAYS STREET						
IALI	LAHASSEE FL 32301-2525		83	S		
			84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes.				in named ser	poration submits the statement for the purpo	ose of changing its registered
office or r	registered agent, or both, in the State	e of Florida. Such change was au	uthorized by	/ the corporati	on's board of directors. I hereby accept the	appointment as registered
	am familiar with, and accept the oblig	ations of, Section 607 0505. Flor	iua Statute	5.		
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable INOTE	Registered Agr	ะก! ราตุกลใบาช ขอดุมาโร	,	XIE
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	PST DELETE		1 1 TITLE			☐ Change ☐ Addition
NAME	ROULEAU,ROBERT		12 NAME			
STREET ADDRESS			ll l	T ADDRESS		
CITY-ST-ZIP	NEPTUNE BEACH FL		14 CHY-1	ST-ZIP		Change Addition
TITLE	DOMESTI BODEST					□ change □ Addition
NAME	1100221011102111		2.2 NAME	1 40000000		
STREET ADDRESS	NEDTINE BEACH E		U	ET ADDRESS		
CITY-ST-ZIP TITLE	<u> </u>		2 4 CITY- 31 TITLE	51- ZIP		Change Addition
NAME	· · · · · · · · · · · · · · · · · · ·		32 NAME	1		
STREET ADDRESS			Ш	T ADDRESS		
CITY-ST-ZIP			34 CITY-			
TITLE		☐ DELETE	4 1 TITLE			Change Addition
NAME			4 2 NAME			
STREET ADDRESS			4 3 STREE	ET ADDRESS		
311 3 2		4.4 CITY-	ST-ZIP			
TITLE	n i		5 1 TITLE			☐ Change ☐ Addition
NAME			52 NAME			
STREET ADDRESS	3			ET ADDRESS		
CITY-ST-ZIP	Capters		5.4 CITY-: 6.1 TITLE			Change Addition
TITLE		☐ DÉLETE	62 NAME			changemaintain
NAME	1		ľ	ET ADORESS		
STREET ADDRESS			64 CITY	\		
CITY ST. 7IP	t .		0.4 CH11.	U1 4H		

14. 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 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 jeceiver 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 for on a hattachment with an address, with all other like empowered.

SIGNATURE: ~