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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000075415 1. Corporation Name

CHAI 7, INC.

Principal Place of Business

3180 N. 36TH ST. HOLLYWOOD FL 33021 Mailing Address

3180 N. 36TH ST. HOLLYWOOD FL 33021

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90104 016 ***150.00



					DO NO	O. M. W.	THIS SPACE	
				3	. Date Incorporated or C	Qualifed		
2. Principal I	Place of Business				10/25/1993			
a. Trincipal r	lace of Busiless	2a. Mailing Address		4.	. FEI Number		777	pplied For
Suite Ant	4 -4-	26			65-0446607		⊢	lot Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.						Additional
22		27		5.	Certificate of Status De	sired 🗌		Additional Required
City & Sta	te	City & State			Election Campaign Fina			
23		28		0.	Trust Fund Contribution			May Be
Zip	Country	Zip	Country					to Fees
4	25	29	30	••	This corporation owes t	ine current yea		_
	9. Name and Address of Current		30]	10	Personal Property Tax.	·	Yes	No
			81 Nan		Name and Address of	New Registe	ered Agent	
	.CHIN, STEVEN B			· / C				
4330) Sheridan St.		82 Stre	et Address (P	O. Box Number is Not	Accentable)		
SUIT	TE 202B		Li	•		(cocplable)		
	LYWOOD FL 33021		83					
1102	E1WOOD 1E 33021		<u> </u>	 -				
			84 City				85 Zip	Code
11. Pursuant	to the provisions of Sections 607,0502	and 607 1508 Florida Statutos	the above	- al			FL	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was aut	horized by the co	eu corporation	submits this statement i	for the purpos	e of changing its	registered
agent. Tai	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	da Statutes.	,	or directors. I hereby	accept the a	ppointment as re	gistered
SIGNATURE	Claret							
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: R	egistered Agent signatur	re required when re	instating)	DATE	: · · · · · · ·	
12. ,	OFFICERS AND	DIRECTORS	egistered Agent signatur					RS IN 12
ITLE	P OFFICERS AND	nd title if applicable. (NOTE: R DIRECTORS			instating) ADDITIONS/CHANGES T		AND DIRECTO	
ITLE	P ROSENFELD, EILEEN	DIRECTORS	13.					
12. ,	P ROSENFELD, EILEEN 3180 N. 36TH ST.	DIRECTORS	13. 1.1 TITLE 1.2 NAME	A			AND DIRECTO	
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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 Block 12 or Block 13 if changed, example the same appears in a statement with an address, with all other like empowered.

IGNATURE:

Daytime Phone #