

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

FILED

May 12 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000033273 (1)**

1. Corporation Name  
**CHI DAI OF LAKE MARY, INC.**

Principal Place of Business <b>3653 LAKE EMMA RD. LAKE MARY FL 32746</b>	Mailing Address <b>3653 LAKE EMMA RD. LAKE MARY FL 32746-6199</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified <b>05/03/1994</b>	3a. Date of Last Report <b>04/17/1996</b>
				4. FEI Number <b>59-3241832</b>	Applied For <input type="checkbox"/> Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>CURTIS, JANET S 2131 HONTOON RD. DELAND FL 32709</b>				10. Name and Address of New Registered Agent 81 Name <b>Helene B Nickens</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>3653 Lake Emma Rd</b> 83 84 City <b>Lake Mary</b> FL 85 Zip Code <b>32746</b>	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Helene B Nickens* *Helene B Nickens* **4/27/97**  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE <b>D</b>	NAME <b>CURTIS, JANET S</b>	STREET ADDRESS <b>2131 HONTOON RD.</b>	CITY-ST-ZIP <b>DELAND FL 32720</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>President</b>	NAME <b>Helene B Nickens</b>	STREET ADDRESS <b>3653 Lake Emma Rd.</b>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP	3.1 TITLE	3.2 NAME
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	4.1 TITLE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	6.1 TITLE	6.2 NAME
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	

14. I do 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 on an attachment with an address.

SIGNATURE: *Helene B Nickens* *Helene Nickens* **3/10/97** **407 333 4263**  
Signature typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)