

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000057966 (1)

1. Corporation Name

2 CHEF, INC.



Principal Place of Business

8287 S. DIXIE HWY.
MIAMI FL 33143

Mailing Address

8287 S. DIXIE HWY.
MIAMI FL 33143

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J. SPIEGEL, CHART
D/B/A AMERILAWYER
343 ALMERIA AVE.
CORAL GABLES FL 33134

81 Name

82 Street Address, P.O. Box Number is Not Acceptable

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.01(2)(b) and 607.15(5), 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, set forth in the Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME	TYPE
P JORGENSEN, JAN K 8287 S. DIXIE HWY. MIAMI FL 33143	☐ DELETE
T BREDAHL, SOREN 8287 S. DIXIE HWY MIAMI FL	☐ DELETE
	☐ DELETE
	☐ DELETE
	☐ DELETE
	☐ DELETE
	☐ DELETE
	☐ DELETE
	☐ DELETE
	☐ DELETE
	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	TYPE
1 NAME	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY & STATE	☐ Change ☐ Addition
2 NAME	
22 NAME	
23 STREET ADDRESS	
24 CITY & STATE	☐ Change ☐ Addition
3 NAME	
32 NAME	
33 STREET ADDRESS	
34 CITY & STATE	☐ Change ☐ Addition
4 NAME	
42 NAME	
43 STREET ADDRESS	
44 CITY & STATE	☐ Change ☐ Addition
5 NAME	
52 NAME	
53 STREET ADDRESS	
54 CITY & STATE	☐ Change ☐ Addition
6 NAME	
62 NAME	
63 STREET ADDRESS	
64 CITY & STATE	

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(a), Florida Statutes. I further certify that the information included in this 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 authorized representative, or that I am empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 12 of the Florida Department of State's records.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SOREN BREDAHL

2.2096 305 663-2100

CR2E034 (12/95)