

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000058340 (8)**

1. Corporation Name

CHASE EAGLE, INC.



Principal Place of Business

Mailing Address

**7300 N. KENDALL DRIVE
MIAMI FL 33156**

**7300 N. KENDALL DRIVE
MIAMI FL 33156**

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/08/1994

3a. Date of Last Report

03/10/1995

4. FEI Number

65-0553780

Applied For

APPLIED FOR

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

**WOLFSON, MERYL
7300 N. KENDALL DRIVE
MIAMI FL 33156**

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 607.0502 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

Signature typed on separate sheet and attached to this report.

Typed Name of Registered Agent Signature required on this report.

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	COOPER, THOMAS A	
STREET ADDRESS	7300 N. KENDALL DRIVE	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	PD	☐ DELETE
NAME	HESSINGER, RICHARD	
STREET ADDRESS	7300 N. KENDALL DRIVE	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	D	☐ DELETE
NAME	TRAPP, LAURENCE J	
STREET ADDRESS	7300 N. KENDALL DRIVE	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	CFOD	☐ DELETE
NAME	BAKER, DONALD	
STREET ADDRESS	7300 N. KENDALL DRIVE	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	S	☐ DELETE
NAME	WOLFSON, MERYL	
STREET ADDRESS	7300 N. KENDALL DR	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	V	☐ DELETE
NAME	DOIRON, DONALD	
STREET ADDRESS	7300 N. KENDALL DR	
CITY-ST-ZIP	MIAMI FL 33156	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	

000001771370

-04/05/96--01089--021

*****200.00**

☐ Change ☐ Addition

2/25

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 address.

SIGNATURE:

Donald E. Baker
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Donald E. Baker

3/18/96 (305) 670-7600
Date Printed
87 8310

CR2E034 (12/95)