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

**PROFIT CORPORATION** ANNUAL REPORT 1000



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 30, 1999 8:00 am Secretary of State 04-30-1999 90002 006 \*\*\*150.00

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DOCUMENT # P9400081593  CHRISO CORPORATION							
CHRISO	CORPORATION						
						A LEGICIAN THE LEGIC PROPERTIES HAVE ARRIVED AND ARRIVED AND ARRIVED AND ARRIVED ARRIV	
Principal Plac	ce of Business	М	ailing Address			I INDICANI EIN INII ANNI DOEII DOIIS ANTEL DOITE	
2451 MCMULLEN BOOTH ROAD 2451 MCMULLEN BOOTH ROAD							
STE 312   STE 312   CLEARWATER FL 33759   CLEARWATER FL 33759					DO NOT WRITE IN THIS	SPACE	
US	. ,	ÜS				3. Date Incorporated or Qualifed	
	<u>* * *</u>					11/03/1994	
⊢ '	Place of Business	-	Mailing Address		·	4. FEI Number	Applied For
21 Suita Ant	#	26	S. 4 . 4			59-3279488	Not Applicabl
Suite, Apt.	. #, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	- 21	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	•			Trust Fund Contribution	Added to Fees
Zip	Country		Zip	Country	,- <u>-</u> -	8. This corporation owes the current year Inte	angible
24	25	29		30		Personal Property Tax.	Yes No
	9. Name and Address of Currer	nt Regis	tered Agent	81	Name	10. Name and Address of New Registered	Agent
FAR	FARANTATOS, G N 2451 MCMULLEN BOOTH ROAD  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)						
l ·			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
SUITE 200				83			· · · · · · · · · · · · · · · · · · ·
CLEARWATER FL 34619			84	City		85 Zip Code	
· ·					. ,	FL	-   .
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 6	07.1508, Florida Statutes	s, the above	-named corporation	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoin	changing its registered
agent. I a	am familiar with, and accept the obliga	tions of,	Section 607.0505, Florid	da Statutes.		tro board of directors. I thereby accept and appear	anchi as regiotorea
SIGNATURE	Signature, typed or printed name of registered age	nt and title	f applicable /NOTE: E	Pacietered Agen	t signature required	when reinstating) DATE	·
12.	OFFICERS AN			13.	r aignaturo roquista	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PSTD		☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	FARANTATOS, G N			1.2 NAME	ļ		
STREET ADDRESS	2451 MCMULLEN BOOTH ROA	id, suf	TE 200	1,3 STREET	ADDRESS	_	
CITY-ST-ZIP TITLE	CLEARWATER FL 34619		☐ DELETE	1.4 CITY-ST	-ZIP		☐ Change ☐ Addition
NAME			□ netere	2.1 TITLE 2.2 NAME	-		☐ Change ☐ Addition
STREET ADDRESS				2.3 STREET	ADDRESS		
CITY-ST-ZIP	_	_	<u>.</u>	2.4 CITY-S			· · · · · · · · · · · · · · · · · · ·
TITLE		4,4,	☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET	ADDRESS		
CITY-ST-ZIP							
TITLE	<del></del>		Cloricic	3.4. CITY-ST	r-zip	<del></del>	
NAME			☐ DELETE	4.1 TITLE	I-ZIP		Change Addition
NAME STREET ADDRESS			☐ DELETE	4.1 TITLE 4.2 NAME			Change Addition
STREET ADDRESS			☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET	ADDRESS		☐ Change ☐ Addition
			☐ DELETE	4.1 TITLE 4.2 NAME	ADDRESS		Change Addition
STREET ADDRESS CITY-ST-ZIP				4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST	ADDRESS		
STREET ADDRESS CITY-ST-ZIP TITLE				4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE	ADDRESS - ZIP		
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELĒTE	4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-ST	ADDRESS -ZIP  ADDRESS -ZIP		☐ Change ☐ Addition

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 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, with all other like empowered.

SIGNATURE: