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 # **P94000092897 (5)**

1. Corporation Name
CHAVEZ BROTHERS, INC.

Principal Place of Business
3711 N. HWY 17
DELAND FL 32720
US

Mailing Address
119 KENDRA AVE
DELAND FL 32724

3. Date Incorporated or Qualified: **12/22/1994**
3a. Date of Last Report: **03/13/1995**

4. FEI Number: **59-3288137** — 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

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 2420 S. WOODLAND BLVD.
Suite, Apt. #, etc.
27
City & State
28 DELAND, FL
Zip 29 32720 Country 30 USA

9. Name and Address of Current Registered Agent

CHAVEZ, SIMON
119 KENDRA AVE
DELAND FL 32724

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
2420 SOUTH WOODLAND BLVD.
83
84 City: DELAND FL 85 Zip Code: 32720

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 (Registered Agent) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	CHAVEZ, SIMON	
STREET ADDRESS	119 KENDRA AVE	
CITY, ST, ZIP	DELAND FL 32724	
TITLE	VD	☐ DELETE
NAME	CHAVEZ, TOMAS	
STREET ADDRESS	202 7TH AVE E APT B	
CITY, ST, ZIP	PALMETTO FL 34221	
TITLE	SD	☐ DELETE
NAME	CHAVEZ, DISIFREDO	
STREET ADDRESS	119 KENDRA AVE	
CITY, ST, ZIP	DELAND FL 32724	
TITLE	TD	☐ DELETE
NAME	CHAVEZ, ANTONIO	
STREET ADDRESS	119 KENDRA AVE	
CITY, ST, ZIP	DELAND FL 32724	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

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: SIMON CHAVEZ - PRESIDENT 2-21-96 (904) 822-9171
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)