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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

P950000 15543 DOCUMENT# 1. Corporation Name

ChinoLS ENTERPRISES, INC.

Principal Place of Business

CITY-ST-ZIP

STREET ADDRESS

TITLE

Mailing Address

May 17, 1999 8:00 am Secretary of State

05-17-1999 90063 017 ***150.00



DO NOT WRITE IN THIS SPACE

Coconut Gler, F1, 35013		3. Date Incorrecated or Qualified 02/24/95	
2. Principal Place of Business) 2a. Mailing Address		4. FEI Number Applied	d For
H 971) ALL KLIN ALL 26		65-0566299 Not Ap	plicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		5. Certificate of Status Desired Section 5.	
22		5. Certificate of Status Desiration Fee Require	red
City & State City & State		6. Election Campaign Financing \$5.00 May	y Be
3 Coconut (ree K-FL28)		Trust Fund Contribution Added to Fe	ees
	ountry	8, This corporation owes the current year Intangible	
33073 25 (J.S.A 29 30)		Personal Property Tax.	No
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
	81 N	lame	
DONALD Nichols	100	street Address (P.O. Box Number is Not Acceptable)	
11070 Alla Cuch no	82 S	nifest Address (F.O. Box Number is Not Acceptable)	
49 10 NW 94 1128	83		
4970 NW 44th Mre Coconut Creek: F1; 33073			
	84 C	City FI 85 Zip Code	е
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		nature required when reinstaling) DATE	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere	rea Agent sign		
		, , , , , , , , , , , , , , , , , , ,	IN 12
12. OFFICERS AND DIRECTORS 13		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12 Addition
12. OFFICERS AND DIRECTORS 13 TITLE DIRECTOR 141	TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
12. OFFICERS AND DIRECTORS 13 TITLE DIRECTOR DELETE 1.11 NAME DONAL & NICHOLS 121	TITLE NAME	ADDITIONS/CI IANGES TO OFFICERS AND DIRECTORS	
12. OFFICERS AND DIRECTORS TITLE DIRECTOR DELETE 1.11 NAME DONAL d Nichols STREET ADDRESS 14970 NW HHT AVE 1.38	TITLE NAME STREET ADD	ADDITIONS/CLIANGES TO OFFICERS AND DIRECTORS Change CRESS	
12. OFFICERS AND DIRECTORS TITLE DIRECTOR NAME DONALD NICHOLS STREET ADDRESS 4970 NW HHT AVE CITY-ST-ZIP COCONUL CREEK: FL; 33073 13073	TITLE NAME STREET ADD	ADDITIONS/CI IANGES TO OFFICERS AND DIRECTORS [] Change [DRESS	Addition
12. OFFICERS AND DIRECTORS TITLE NAME DONALD NOTE DELETE 1.11 DELETE 1.12 DONALD DONALD DONALD DONALD 1.21 DONALD DONAL	TITLE NAME STREET ADD CITY-ST-ZIP	ADDITIONS/CI IANGES TO OFFICERS AND DIRECTORS [] Change [DRESS	
12. OFFICERS AND DIRECTORS TITLE DIRECTOR NAME DONALD NICHOLS STREET ADDRESS 4970 NW HHT AVE CITY-ST-ZIP COCONUL CREEK FL 33073 TITLE SECRETARY NAME Delores Nichols 221	TITLE NAME STREET ADD CITY-ST-ZIP TITLE	ADDITIONS/CLIANGES TO OFFICERS AND DIRECTORS Change Change	Addition
12. OFFICERS AND DIRECTORS TITLE DIRECTOR NAME DONALD NICHOLS STREET ADDRESS 4970 NW HHT AVE CITY-ST-ZIP COCONUL CREEK: F1: 33073 THE SECRETARY NAME DELORES NICHOLS STREET ADDRESS 4970 NW 444 AVE 235	TITLE NAME STREET ADD CITY-ST-ZIP TITLE NAME STREET ADD	ADDITIONS/CLIANGES TO OFFICERS AND DIRECTORS Change Change Change	Addition
12. OFFICERS AND DIRECTORS TITLE DIRECTOR NAME DONALD NICHOLS STREET ADDRESS 4970 NW HHT AVE CITY-ST-ZIP COCONUL CREEK FL; 33073 TILE SECRET ARY Delores Nichols STREET ADDRESS 4970 NW 444K AVE 235 CITY ST 710 COCONUL CREEK; FL; 33073 2.4	TITLE STREET ADD CITY-ST-ZIP TITLE NAME STREET ADD 4 CITY-ST-ZIP	ADDITIONS/CLIANGES TO OFFICERS AND DIRECTORS Change Change Change Change	Addition
12. OFFICERS AND DIRECTORS TITLE DIRECTOR NAME DONALD NICHOLS STREET ADDRESS 4970 NW HHT AVE CITY-ST-ZIP COCONUL CREEK FL; 33073 LAC TITLE SECRET ARY Delores Nichols STREET ADDRESS 4970 NW 444 AVE 231 CITY ST 710 COCONUL CREEK; FL; 33073 2.4	TITLE NAME STREET ADD CITY-ST-ZIP TITLE NAME STREET ADD	ADDITIONS/CLIANGES TO OFFICERS AND DIRECTORS Change Change Change Change	Addition
12. OFFICERS AND DIRECTORS TITLE DIRECTOR NAME DONAL & NICHOLS STREET ADDRESS 4970 NW HHT AVE CITY-ST-ZIP COCONUT CREK FLS 33073 LAC TITLE SECRET ARY NAME DELORES NICHOLS STREET ADDRESS 4970 NW HYTH AVE CITY ST 710 CITY AUT CREK FL 33073 LAC TITLE VICE PLESIDENT DELETE 311	TITLE STREET ADD CITY-ST-ZIP TITLE NAME STREET ADD 4 CITY-ST-ZIP	ADDITIONS/CLIANGES TO OFFICERS AND DIRECTORS Change Change Change Change	Addition
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12. OFFICERS AND DIRECTORS TITLE DIRECTOR NAME DONAL & NICHOLS STREET ADDRESS 4970 NW HHT AVE CITY-ST-ZIP COCONUT CREK: F1; 33073 TITLE Secret ARY NAME Delores Nichols STREET ADDRESS 4970 NW HYTK AVE 235 TITLE VICE PRESIDENT NAME JOCHLYN Nichols STREET ADDRESS THE TOCHLYN Nichols TOCHLYN NW HYTT AVE 333	TITLE NAME STREET ADD CITY-ST-ZIP TITLE NAME STREET ADD 4 CITY-ST-ZIF TITLE	ADDITIONS/CLIANGES TO OFFICERS AND DIRECTORS Change Change Change Change Change Change Change	
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12. OFFICERS AND DIRECTORS TITLE NAME DONAL A NICHOLS STREET ADDRESS H970 NW HHH AVE CITY-ST-ZIP COCONUL CREK: FL; 33073 1.40 TITLE Secret ARY NAME Delores Nichols STREET ADDRESS H970 NW HHK AVE 235 TITLE VICE President NAME TOCHINN Nichols STREET ADDRESS H970 NW HYK AVE 33073 1.41 1.42 1.43 1.44 1.4	TITLE NAME STREET ADD CITY-ST-ZIP TITLE NAME STREET ADD 4 CITY-ST-ZIP TITLE NAME STREET ADD CITY-ST-ZIP	ADDITIONS/CLIANGES TO OFFICERS AND DIRECTORS Change Change Change Change Change Change Change	
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6.4 CITY-ST-ZIP CITY-ST-ZIP 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 size is reshall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as the first 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 empower:

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

Change

Addition