## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

**FILED** 

Sep 25 1997 8:00am

Secretary of State

## Sandra B. Morthanf

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000037911 (1) CHILE HOME IMPROVEMENT, INC. Principal Place of Business Mailing Address 10020 SW 12TH ST 10020 SW 12TH ST MIAMI FL 33174 **MIAMI FL 33174** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 05/11/1995 07/16/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 21 26 APPLIED FOR Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. 25 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MEZA, JAIME S 10020 SW 12TH ST 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33174** 83 84 Zip Code 85 11. Pursuant to the profisions 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 objections of, Section 607.0505, Florida Statutes: SIGNATURE nd tilo il applicable (NOTE: Registered Age 12. D DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Change Addition TITLE 1.1 TITLE MEZA, JAIME S NAME 1.2 NAME 10020 SW 12TH ST STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33174** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE MEZA, JAIME A NAME 2.2 NAME 10020 SW 12TH ST 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33174** CITY-ST-ZIP 2.4 CITY-\$1-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS **6.3 STREET ADDRESS** 

14. I do 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 suppliemental annual roport is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of true corporation or true corporat