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Apr 13 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000063199 (0)

1. Corporation Name  
CHR, INC.

Principal Place of Business

7210 RED RD  
SUITE 2020  
S MIAMI FL 33143  
US

Mailing Address

7210 RED RD  
SUITE 2020  
S MIAMI FL 33143  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/16/1995

4. FEI Number

65-0600129

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 9002 S.W. 152 ST.

Suite, Apt. #, etc.

22

City & State

23 MIAMI FL

Zip

24 33157

Country

25 JADE

2a. Mailing Address

26 9002 S.W. 152 ST.

Suite, Apt. #, etc.

27

City & State

28 MIAMI FL

Zip

29 33157

Country

30 JADE

9. Name and Address of Current Registered Agent

RIEGLER, JAMES  
12851 S DIXIE HWY  
SUITE 209  
MIAMI FL 33156

81 Name

82 RIEGLER, JAMES

83 Street Address (P.O. Box Number is Not Acceptable)

9002 SOUTHWEST 152 STREET

84 City

MIAMI

FL

85 Zip Code

33157

10. Name and Address of New Registered Agent

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 or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/6/98

12. OFFICERS AND DIRECTORS

TITLE DVPS  
NAME PAINE, TRAVERS III  
STREET ADDRESS 301 WHEELER EXECUTIVE CTR 3540 WHEELER RD  
CITY-ST-ZIP AUGUSTA GA

TITLE DP  
NAME RIEGLER, FILOMENA  
STREET ADDRESS 12851 S DIXIE HWY  
CITY-ST-ZIP MIAMI FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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:

Filomena Riegler

4-7-98 (305) 971-5900

CR2E034 (10/97)