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Apr 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000014611 (3)

1. Corporation Name  
CHARTERHOUSE ASSET MANAGEMENT CORP.



Principal Place of Business  
3501 WEST VINE ST. #352  
KISSIMMEE FL 34741

Mailing Address  
3501 WEST VINE ST. #352  
KISSIMMEE FL 34741-4849

3. Date Incorporated or Qualified 02/16/1996	3a. Date of Last Report
4. FEI Number 59-053202015	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

SONNENSCHNEIN, MICHAEL D--  
220 E HILLCREST ST--  
ORLANDO FL 32801--

10. Name and Address of New Registered Agent

81 Name ARIF K. AL-HAKIM  
82 Street Address (P.O. Box Number is Not Acceptable)  
3501 W. VINE STREET  
83  
84 City KISSIMMEE FL 85 Zip Code 34741

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 *A. Al-Hakim* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PO	<input type="checkbox"/> DELETE
NAME	AL-HAKIM, ARIF K	
STREET ADDRESS	3501 W VINE ST, #352	
CITY - ST - ZIP	KISSIMMEE FL 34741	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	SCHALL, ROBERT	
STREET ADDRESS	3501 WEST VINE ST, #352	
CITY - ST - ZIP	KISSIMMEE FL 34741	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BROWN, ANTHONY	
STREET ADDRESS	LA MIRADA PLAZA - 3501 W VINE ST, #352	
CITY - ST - ZIP	KISSIMMEE FL 34741	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WOODS, CHRISTY C	
STREET ADDRESS	LA MIRADA PLAZA - 3501 W VINE ST, #352	
CITY - ST - ZIP	KISSIMMEE FL 34741	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	STANFORD, CRYSTI L.
4.3 STREET ADDRESS	LA MIRADA PLAZA - 3501 W. VINE ST, #352
4.4 CITY - ST - ZIP	KISSIMMEE, FL 34741
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 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: *A. Al-Hakim* DATE: 2/26/97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)