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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000061497 (9)

CHAPMAN ENTERPRISES OF PALM BEACH COUNTY, INC.

FILED Apr 04 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 16766 98TH WAY NORTH 16766 98TH WAY NORTH										
JUPITER FL 33			JUPITER FL				·			
							3. Date Incorporated or Qualified 07/23/1996	3a. Date of Last Report		
2. Principal Pa	ace of Business		2a. Mailing A		1 4. •		4. FEI Number	Applied For		
1 6759	white	Drive	26 1676	6 91	3th Wo	y N.	65-0688997	Not Applica		
Suite, Apt			Suite, Ap	·			5. Certificate of Status Desired	S8.75 Additiona Fee Required		
City & State 3 River	ra Beach.	Florida	City & Str	ate iter.	Florida	1	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip		Country	Zip	178	Coul		8. This corporation has liability for i			
4 3340		Address of Curren	29 331		30),\$,4	Florida Statutes 10. Name and Address of New Re	Yes No		
			it negistered Age	MIL		81 Name				
CHAPMAN, SANAH E							2Heth Chhamal Ma	heah charman medougall		
	ITER FL 33478	NORTH				82 Stree	t Address (P.O. Box Number is Not Acceptab	(e)		
501	I) EI(I E OOT/O				ł	83 16	766 98th Way North			
					!	84 City	 	85 Zip Code		
							Jupiter	FL 33478		
agent La	Social	e Chasen	un McD	bugal	X .	SARAY		3/31/97		
12.	Signature, typed or pri	ned name of registered ago OFFICERS AN		(1)	VOTE: Registered	Agent signatu	re required when reinstating) ADDITIONS/CHANGES TO OFFIC	PRS AND DIRECTORS IN 12		
TITLE	D	071102110741		DELETE	1.1 TH	LE	President	Change Add		
NAME	CHAPMAN, S	SARAH E	_	_	1.2 NA		SHRINH CHIPPMAN MEDO			
\$1REET ADDRESS	16766 98TH				1.3 ST	REET ADDRESS		k.		
CITY+S1-ZIP	JUPITER FL	33478			1.4 01	Y-ST-ZIP	Jupiter, Florida	33478		
TITLE			L.	DELETE	2.1 111	LE		Change Add		
NAM:					2.2 NA	ME				
STREET ADDRESS					2.3 ST	REET ADDRESS				
CHY-S1-ZIP					2. 4 CI	TY-ST-ZIP				
TITLE				DELETE	3.1 TIT	LE		☐ Change ☐ Add		
NAME					3.2 NA	WE				
STREET ADDRESS					3.3 \$T	reet address				
CITY-SI-70			· · · · · · · · · · · · · · · · · · ·		3 4. C	TY-ST-ZIP				
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NAME					5.2 NA					
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City -SF-7P				DELETE		IY-ST-ZIP	<u> </u>	[] () () () () () () () () () (
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NAME					6.2 NA					
STREET ADDRESS						reet address	;			
COLY-ST 7P					6.4 CF	Y-\$1-ZIP				

4. 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:

ATURE AND TYPED OR PRINTED NAME OF JOINING OFFICER OR DIRECTOR

3/31/97 561-748-004