

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

FILED

Feb 09 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000069536 (6)

1. Corporation Name

COMMUNITY CHEST PRODUCTION, INC.

Principal Place of Business

Mailing Address

19201 COLLINS AVE
N MIAMI BCH FL 33160
US

300 SEVILLA AVE
SUITE #309
CORAL GABLES FL 33134
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/21/1996

4. FEI Number

65-0695244

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 19201 COLLINS AVE

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28

29 Zip

25 Country

29

30 Zip

30 Country

9. Name and Address of Current Registered Agent

FIGUEROA, JUAN A. P.A. C
300 SEVILLA AVE
SUITE 309
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

DAVID GOLDSMEIN

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

100 S.E. 2nd St.

83

SUITE # 2750

84 City

MIAMI

FL

85 Zip Code

33131

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 provisions of Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

Signature of officer or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

X 1/27/98

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME DP
ZEPKA, SAM
STREET ADDRESS 100 SE SECOND ST
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ DELETE

NAME DV
ROSENTHAL, LOUIS
STREET ADDRESS 100 SE SECOND ST
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ DELETE

NAME D
ZEPKA, VICTOR
STREET ADDRESS 100 SE SECOND ST
CITY-ST-ZIP MIAMI FL 33131

TITLE ☒ DELETE

NAME D
ROSENTHAL, SAM
STREET ADDRESS 100 SE SECOND ST
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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

DV ☒ Change ☐ Addition

LOUIS ROSENTHAL
19201 COLLINS AVE
SUNNY ISLES BEACH, FL 33160

PD ☒ Change ☐ Addition

VICTOR ZEPKA
19201 COLLINS AVE
SUNNY ISLES BEACH, FL 33160

☐ Change ☐ Addition

SD ☐ Change ☒ Addition

WILLIAM ZEPKA
19201 COLLINS AVE
SUNNY ISLES BEACH, FL 33160

☐ Change ☐ Addition

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:

[Signature]

U.P. X 1-31-98 X 662-1700

CR2E034 (10/97)