

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 02, 2004 8:00 am
Secretary of State

08-02-2004 90019 037 ***150.00

DOCUMENT # P96000077488

1. Entity Name

CHELSEA ENTERPRISES, INC.



Principal Place of Business

7011 N PINE ISLAND
TAMARAC FL 33321
US

Mailing Address

~~7011 N PINE ISLAND~~
~~TAMARAC FL 33321~~
~~US~~
1055 NW 121 LANE

2. Principal Place of Business

3. Mailing Address

1055 NW 121 LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CORAL SPRINGS FL

City & State

CORAL SPRINGS FL

Zip

33071

Country

BROWARD

Zip

33071

Country

FL

6. Name and Address of Current Registered Agent

ORETSKY, BEVERLY
7011 N PINE ISLAND RD
TAMARAC FL 33321

7. Name and Address of New Registered Agent

Name Same

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

1055 NW 121 LANE

City

CORAL SPRINGS FL

Zip Code

33071

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 8, 2004

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PDS
NAME ORETSKY, BEVERLY
STREET ADDRESS 1055 NW 121 LANE
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Delete

TITLE VPT
NAME ORETSKY, JILL
STREET ADDRESS 1055 NW 121 LN
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Delete

TITLE T
NAME ORETSKY, JILL A
STREET ADDRESS 1055 NW 121 LN
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Beverly Oretsky President 7/29/04 954 766 8000
726 8000