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

PROFIT
CORPORATION
ANNUAL REPORT
* 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOC4 MENT #

P9700021727 CHIAN, INC. FILED Apr 14 1998 8:00am Secretary of State

		•				
Principal Plac	ce of Business	Mailing Address				
	1010 0 10	4011	C#1	. 0		
	6860 Gulfport Blvd. S.#169				DO NOT WRITE IN THIS SPACE	
	St. Petersb	400 51. 5	271	7	3. Date Incorporated or Qualified	
<u> </u>	SI. PETERSD		370	<u> </u>	March 7, 199	7
2, Principal f	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	4 -1-	Suite Apt. #, etc.			EIN 59-3435033	
Suite, Apt.	. #, etc.	<u> </u>			5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & Stat	le	City & State	~ -		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip Country		try	8. This corporation owes or has paid the current year Intangible	
24	25 29 30		30	Personal Property Tax due June 30. 🔲 Yes 🔲 No		
!	9. Name and Address of Curren	t Registered Agent		Name	10. Name and Address of New Registered	/ Agent
			1	Name		
	Corporation 1201 Hays S	Service Camo	ZNV E	Street Ad	oress (P.O. Box Number is Not Acceptable)	
		desiring comp	~~``7 ₇	33		
	1201 Mays 5	TREET				
0.00	Tallahassee,	Florida 323	0/ ^{[5}	City	FI	85 Zip Code
11. Pursuant				ve-ramed co	rporation submits this statement for the purpose	of changing its registered
office or r	registered agent, or both, in the State am familiar with, and accept the obligations.	of Florida, Such change was	authorized	by the corpora	ation's board of directors. I hereby accept the ap-	pointment as registered
•	am rantimar with, aste accept the compe	TICE IS OIL DECIDED TO STATE	ionoa stato	163.		
SIGNATURE	Signature, typed or ported name of registered age	et acer tito if applicable (NC	11 Hegistered	Agon; signature req	jured when re-instating) DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN	
HTLE.		☐ DELETE	4.1.2011	f	PRESIDENT	☐ Change ☐ Addition
NAME			1.2 NAM	IE	Charles H. Pritchard 10495 Longwood Drive Largo, Florida 33777	
STREET ADDRESS			•	ET ADDRESS	10442 CONG DOG DRIVE	
CITY-ST-ZIP TITLE		☐ DELETE	2.1 TUTE	·ST-7IP	Lango, riokida 33177	Chance Addition
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STREET ADDRESS				ET ADDRESS		
City-ST-ZIP				r-ST-ZIP		
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NAME			3 2 NAM	٤		
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NAME			4 2 NAA	Į.		Ţ
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CITY-ST-ZIP			5 4 CITY		· · · ///	' 1/ /
TITLE		DELETE	6 1 TITLE		5000024884	Addition
NAME			6.2 NAM		-04/14/9801070	022
STREET ADDRESS			63 STRE	ET ADDRESS	***158.75	Ì
CITY CT_ 7ID			647018	01 7.0		ł

14. Thereby 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:

WATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

April 10, 1998

(813) 391-6178