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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary & State DIVISION OF CORPORATIONS

DOCUMENT # P9700024773 (8)						
	CHUCK	(O OF PALM BEACH COUN	NTY INC.			
Principal Place of Business N			Mailing Address		T 100/1891 110 INTILIONI ONLI POLIT REILI DRITO (1911)	Bidit (Mas) (And) fill (MA)
2784 PALMARITA ROAD			2784 PALMARITA ROAD			
WEST PALM BEACH FL 33406			WEST PALM BEACH FL 33406		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	PAGE.
					03/19/1997	
2 . F	rincipal P	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21			26		65-0733764	Not Applicable
_ 5	Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22			27		s. Certificate of Status Desired	Fee Required
_	City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23	ip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	ΣIÞ	Country	Zip	Country	8. This corporation owes or has paid the curn Personal Property Tax due June 30.	ent year intangible Î Yes □ No
24		25 25 Name and Address of Curre	29 nt Registered Agent	30	10. Name and Address of New Registered A	
	CO	DVINGTON, CHARLIE		81 Name	10.	3- ···
COMINGTON, CHARLIE						
WEST PALM BEACH FL 33406				82 Street Add	tress (P.O. Box Number is Not Acceptable)	
		to them belief to total		83		
						leal Trib
				84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this					poration submits this statement for the purpose of	changing its registered
office or registered agent, or both, in the State of Ferida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am family with and accept the obligations of, South 607,0505, Florida Statutes.						
SIGNATURE Mulli & Conto CHARLES E. LOVENATON						
Sidi	INATURE.	Signature, typica or ported name of regentied as	engani pari da; q Lable (NO	1E: Registered Agent's gnature requ	ered when reinstating) DATE	
12.		OFFICERS	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE		PASIENENT	☐ DELETE	1.1 DILE	· ·	Change Addition
NAME		CHURIEF LOVENSTON		1.2 NAME		
	ET ADDRESS	2784 MALMAKETAKO		1.3 STREET ADDRESS		
CITY -	ST-ZIP	W. Palm BEHLH, FL.	73700 DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
	- 1	VI PRESIDENT	□ nerene		'	T cutuile T vantenii
NAME		MARCENE SEMONE		2.2 NAME		
	ET ADDRESS St-zip	MARRIEUS SEMONE SEL SANGUES RA. W.PALON NEARN, FL	53406	2.3 STREET ADDRESS		
TITLE		THE PERSON, PU	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME	- 1			3.2 NAME	•	
	T ADDRESS			3.3 STREET ADDRESS		
	ST-ZIP			3.4 CITY - ST - ZIP		
TITLE			DELETE	41 TITLE		Change Addition
NAME	:			4.2 NAME		
STREE	T ADDRESS			4.3 STREET ADDRESS		
CITY-	ST-ZIP			4.4 CITY - ST - ZIP		
TITLE			DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREE	T ADDRESS			5.3 STREET ADDRESS		
CITY-	ST-ZIP			5.4 CITY-ST-ZIP		
TITLE			DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		
STREE	ET ADDRESS			6.3 STREET ADDRESS		
	ST-ZIP	L		6.4 CITY - ST - ZIP		
					Section 119.07(3)(i), Florida Statutes. I further ceri ure shall have the same legal effect as if made und	
indicated on this amoual report or supplemental armual report is true and accurate and that my signature shall have the same legal effect as if made under path; 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 changes of the attactment with an address.						
	Block 12 (or Block 13 if change of the ari atta	icoment with an address	_		1

FILED

May 14 1998 8:00am

Secretary of State