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

1. Corporation	MENT # P9700(CHEL, INC.	0061189 (1)			
Principal Place of Business		Mailing Address			I JUBERUGA KIU 18KKI 18BIK BAKKA BUKKA BUKKA BUKAA KARDA INDUA 19KKA BUKA
2340 PERIWINKLE WAY SUITE J.3 SANIBEL ISLAND FL 33957		2340 PERIWINKLE WAY SUITE J-3 SANIBEL ISLAND FL 33957			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
					07/15/1997
2. Principal Place of Business		2a. Mailing Address	······································		4 FEI Number
21		26			65-0771813 Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Country	Zip 29	Countr 30	у	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes
J J	9, Name and Address of Currer				10. Name and Address of New Registered Agent
RA	TLIFF. ROBERT LEE III		81	Name	
2340 PERIWINKLE WAY			82	Street A	ddress (P.O. Box Number is Not Acceptable)
SUITE J-3					out out (1.0. Box Harrison to Harrison by
SANIBEL ISLAND FL 33957			83	<u>'</u>	
			84	City	FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligi	2 and 607.1508, Florida Statute of Florida. Such change was a ations of, Section 607.0505, Flo	es, the about authorized burida Statute	re-named c by the corposes.	corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered
SIGNATURE					
				ont signature fi	equired when reinstating) DATE
TITLE	PSTD OFFICERS AND	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	RATLIFF, ROBERT LEE III		1.2 NAME		Change Addition
STREET ADDRESS	AAAA DEDHAMARA E 18/AY ATC 1 A			T ADDRESS	
CITY-ST-ZIP	SANIBEL ISLAND FL 33957		1.4 CiTY-:		
TITLE		☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREE	T ADDRESS	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	
TITLE	- `		3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME	l	
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP TITLE			3.4. CITY-	ST-ZIP	Observe T Addition
NAME		☐ Officie	4.1 TITLE	1	☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET	1	j
CITY-ST-ZIP			4.4 CITY - 5		
TITLE		DELETE	5.1 TITLE	71 411	Change Addition

CITY-ST-ZIP 6.4 CITY-ST-ZIP 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.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

Change

■ Addition

FILED

Apr 01 1998 8:00am

Secretary of State

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP