2003 FOR PROFIT CORPORATION

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1. Entity Name

CHUMMY	/ INC.	`				
Principal Plac 7964 ORLEAN MIRAMAR FL	te of Business IS ST 33023	Mailing Address P.O. BOX 83-4864 HOLLYWOOD FL 33083-44	864			
2. Principal P	Place of Business Miramar Blud.	3. Mailing Address				###
Suite, Apt.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHA	NGES
City & State	mar, FL	City & State			4. FEI Number 65-0858803	Applied For Not Applicable
Zip 3302	Country 3	Zip	Count	try		75 Additional Required
	6. Name and Address of Current I	Registered Agent			7. Name and Address of New Registered Agent	
	ENWORTH A				s (P.O. Box Number is Not Acceptable)	
-1002-MYI -MIRAMAR	TFLE COURT - FFL 33023			75 2 C	Miramar Blud,	
<u></u> .						ip Code 33023
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	d office or regist	tered agent, or both, in the State of Florida. I am familia	r with, and accept
- SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	E: Registered	Agent signature requi	ired when reinstating) DATE	
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of	State			9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO LENWORTH, HYATT A 1002-MYRTLE CT- H OLLYWOOD FL 330 23	Delete		ET ADDRESS L	enworth A. Hyatt, 20 Miramas Riva. 20 Miramas Riva.	hange
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete		T ADDRESS 7	ecretaryspence lawis A. Jspence Brud, Spo miramar Blud, liramar FL 3302	change Addition
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TITLE NAME STREET ADDRESS CITY-ST-7IP		☐ Delete				hange 🗌 Addition

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

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR