

FILED  
Sep 11, 2003 8:00 am  
Secretary of State

09-11-2003 90079 005 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000087276

1. Entity Name  
**CHISHOLM SERVICES, INC.**



Principal Place of Business  
18400 S.W. 280 STREET  
MIAMI, FL 33031

Mailing Address  
18400 S.W. 280 STREET  
MIAMI, FL 33031

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0874086

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOLD, STUART M  
8180 N.W. 36TH STREET  
SUITE 100  
MIAMI, FL 33166

Name

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

City

FL

Zip Code

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 resigning)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CHISHOLM, FAY  
18400 S.W. 280 STREET  
MIAMI, FL 33031 ☐ Delete

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

TITLE  
NAME  
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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:

*Assistant to FAY CHISHOLM, Director*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-5-03

Date

(305) 477-7447 X101

Daytime Phone #

CRZE034 (10/02)

*Attachment*

*80147445*  
*P98000087276*

**Guernica & Gonzalez**

**Certified Public Accountants**

**8180 N.W. 36 St., Ste. 230**

**Miami, Florida 33166**

**Telephone No. (305) 477-7447 Fax No. (305) 477-2115**

**E-Mail Address: GGCPA@Bellsouth.Net**

**September 6, 2003**

**Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**

**Re: Chisholm Services, Inc.  
Doc. No. P98000087276  
UBR for 2003**

**Ladies and Gentlemen:**

**We kindly request the reinstatement of Chisholm Services, Inc., without penalty, due to reasonable cause.**

**For some reason the postal service failed to deliver the original Uniform Business Report form. Accordingly, our client was unaware that the filing obligation had not been met. Upon receipt of the reinstatement form our client was alerted to the situation. Please process the enclosed UBR form without penalty.**

**Should you require additional information, please do not hesitate to contact us.**

**Sincerely,**



**Ed Gonzalez**