

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S54048** (1)

1. Corporation Name

CHESTER CORPORATION



Principal Place of Business

**1800 S. OCEAN BLVD., #512
POMPANO BEACH FL 33062**

Mailing Address

**1800 S. OCEAN BLVD., #512
POMPANO BEACH FL 33062**

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

05/20/1991

3a. Date of Last Report

04/07/1995

4. FEI Number

65-0449863

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**URBINA, JAVIER
1800 S. OCEAN BLVD., #512
POMPANO BEACH FL 33062**

10. Name and Address of New Registered Agent

81 Name

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

83

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 statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Agent's typed or printed name and address (from front of this report)

Date Registered Agent signed and registered when reinstated

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	URBINA, JAVIER	
STREET ADDRESS	1800 S OCEAN BLVD #512	
CITY-ST-ZIP	POMPANO BCH FL	
TITLE	D	☐ DELETE
NAME	URBINA, JULIA	
STREET ADDRESS	1800 S OCEAN BLVD #512	
CITY-ST-ZIP	POMPANO BCH FL	
TITLE	D	☐ DELETE
NAME	URBINA, JAVIER, JR.	
STREET ADDRESS	1800 S OCEAN BLVD, #512	
CITY-ST-ZIP	POMPANO BCH FL	
TITLE	D	☐ DELETE
NAME	URBINA, JAIME	
STREET ADDRESS	1800 S OCEAN BLVD #512	
CITY-ST-ZIP	POMPANO BCH FL	
TITLE	D	☐ DELETE
NAME	URBINA, ALEJANDRO	
STREET ADDRESS	1800 S OCEAN BLVD #512	
CITY-ST-ZIP	POMPANO BCH FL	
TITLE	D	☐ DELETE
NAME	LANGE, CLAUDIA V	
STREET ADDRESS	1800 S OCEAN BLVD #512	
CITY-ST-ZIP	POMPANO BCH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAVIER URBINA

JAN. 18/1996

Date

Daytime Phone #

CR2E034 (12/95)