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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 04 1997 8:00am

Secretary of State

0313167

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V29320

(1)

R. CHIGE, INC.													
Principal Place of Business Mailing Address									1	T DOBIN QUIDNO PROPE PORO DINA DIGIN DOI	I OTOM BIBIT	DARAH BIRAH BIRAH I	1000 1000
4531 NORTH DIXIE HIGHWAY 4531 NORTH DIXIE HIGHWA BOCA RATON FL 33431 BOCA RATON FL 33431-502													
										Date Incorporated or Qualified 04/17/1992		ate of Last Re 29/1996	port
	rincipal Pl	lace of Busi	noss	2a. Mailing A	2a. Mailing Address				4.	FEI Number		 	plied For
21				26	Suite, Apt. #, etc.				 	11-2567496			Applicable
22	Suite, Apt. #. etc.			├ ~-,	Suite, Apr. #, etc.				5.	Certificate of Status Desired		\$8.75 A	T I
	City & State				City & State				6.	Election Campaign Financing		\$5.00	
23				28	28					Trust Fund Contribution		Added to	
	Zip		Country	Zip	Zip Country				8. This corporation has liability for intangible tax under s. 199.032,				
24		25 29 30 30 9. Name and Address of Current Registered Agent				[30]				74	Yes [
!				rrent Hegistered Age	Registered Agent 81 Name				10.	Name and Address of New Re	gistered	Agent	
CHIGE, RONNIE								Ng/116					
			HIGHWAY			8	2 5	Street Addre	ddress (P.O. Box Number is Not Acceptable)				
BOCA RATON FL 33431													
					8:								
						8	4 C	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 change of the corporation of the corporation of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation submits this statement for the purpose of change was authorized by the corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment of the purpose of t												f changing its	s registered
	office or re	egistered a	gent, or both, in the S	State of Florida, Such of	change was	authorized	by th	ne corporation	ion's b	oard of directors. I hereby acce	pt the app	cointment as	registered
		HE GIFTHEE W	in, and accept the c	ionganoris or, section	001.0000,11	Oricia Statut	.03.						1
SIGNATURE Signature, speed or printed name of registered agent and title if applicable (NOTE I								signature require	ed when	reinstating)	DATE		
12.	,		OFFICERS	AND DIRECTORS		13.			Α	DDITIONS/CHANGES TO OFFI	CERS AND		
1114	1	P		L	_] DELETE	1.1 TITLE	E	ļ				Change	Addition
			, RONNIE			1.2 NAM	12 NAME						į.
			DIXIE HWY			1.3 STRE							
	- S1 - Zif-	BOCA R	ATON FL 33431		Locuere	1.4 CITY		ZIP				TT Observe	I Addition
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	-\$1-ZIF					3.4 CITY		1					
TITLE					DELETE	4.1 TITLE						Change	Addition
NAMI	ļ			_		4. 2 NAN							
	ET ADDRESS					4.3 STRE		ORESS					
	-ST-ZIP					4.4 CITY	-ST-2	ZIP					
1111.8				Ĺ] DELETE	5.1 TiTL						Change	Addition
NAME	E					5.2 NAM	IE						
STRE	ET ADDRESS					53 STRE	EET AD	ORESS					
COY	- \$1-2IF					5.4 CITY	-ST-7	ZIP					
TITLE	-				DELETE	6.1 TITLE	E					Change	Addition
NAM	E į					6.2 NAM	Œ			(* c *			
STRE	ET ADDRESS					6.3 STRE	EET AD	idress		• •			ļ
	-\$1-719					6.4 CITY							
14.	I do herel informatio	by certify the in ind-pated	at the information sup on this armual report	oplied with this filing d t or supplemental ann	oes not qual ual report is	iry for the e true and ac	xemp	ption stated ite and that	ın Sed my siç	ction 119.07(3)(i), Florida Statut gnature shall have the same leg	es. I furthe al effect a	ir certify that s if made und	trie der oath; that