

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000093438

**Entity Name:** C&C CREDIT CONTROL CORP.

**Current Principal Place of Business:**

800 BRICKELL AVE.  
SUITE 1000A  
MIAMI, FL 33131

**Current Mailing Address:**

800 BRICKELL AVE.  
SUITE 1000A  
MIAMI, FL 33131

**FEI Number:** 20-1266493

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name ORTEGA, XAVIER PRESIDE  
Address 800 BRICKELL AVE # 1000A  
City-State-Zip: MIAMI FL 33131

Title VP  
Name LLABRES, GASPAR VICE PR  
Address 800 BRICKELL AVE. # 1000A  
City-State-Zip: MIAMI FL 33131

Title SEC  
Name ORTEGA, XAVIER SECRETA  
Address 800 BRICKELL AVE # 1000A  
City-State-Zip: MIAMI FL 33131

Title TR  
Name LLABRES, GASPAR TREASUR  
Address 800 BRICKELL AVE # 1000A  
City-State-Zip: MIAMI FL 33131

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** XAVIER ORTEGA

**PRESIDENT**

**04/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date