2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 195798 1. Entity Name THE C AND C BUILDING INC.						FILED FORETARY OF 1 191510H OF CORPC	STANL PRATIS :		
Principal Place	e of Business	Mailing Address	Mailing Address			00 OCT 30 AM	11:39		
708 GLADWIN AVENUE FERN PARK FL 32730		708 GLADWIN AVENUE FERN PARK FL 32730							
							()	(8)) 8)8)) (8 8)	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			RE	INSTRUCTEN	US SPACE		_
City & State		City & State			4. F	El Number 59-6058735		pplièd For ot Applicable]
Zip Country		Zip Country				Certificate of Status Desired	\$8.75 Ad Fee Require		
	6. Name and Address of Current	Registered Agent		Nama	7. N	ame and Address of New Register	ed Agent		-
· WEN	IDEL, DOROTHY	<u> </u>		Name			<u> </u>		1
708	GLADWIN AVENUE N PARK FL 32730			Street Addres	ss (P.O. Bo	ox Number is Not Acceptable)			-
	Trans to our ou			City			Zip Coo	de	
8. The above	named entity submits this statement for	or the ourgose of changing its-	re aistere	d office or regis	stered age				1
SIGNATURE .	7	NOEL Pus de	not	hy Wes	rdel	10/2	<u>5-00</u>		
Tax filing re	oration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW!!!, FEE IS \$550.00 After SEPTEMBER 13, 2000 Min. will be \$75 Make Check Payable to Department of St				-10. Election Campaign Financing Trust Fund Contribution.		00 May Be	
11.	OFFICERS AND	DIRECTORS	12.		ADI	DITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 11	1,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WENDEL, DOROTHY 708 GLADWIN AVENUE FERN PARK FL	☐ Delete				50000346 3 -11/15/00-		Addition	00/1/7/001
TITLE	T T T T T T T T T T T T T T T T T T T	☐ Delete	TITLE			<u>-11715/483-</u> ****750.80		BUS BUDAdition	8
NAME Street address	WENDEL, DOROTHY 708 GLADWIN AVENUE			ET ADDRESS					
CITY-ST-ZIP	FERN: PARK-FL SD			ST-ZIP			☐ Change	Addition	-
TITLE NAME STREET ADDRESS	CARLSON, ROY 7870 S.W. 15 ST.	∟J _. Delete	TITLE NAME STREI				change	Addition	
CITY-ST-ZIP	MIAMI,,FL	•	CITY-	ST-ZIP					4
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREE		\n	11/42	☐ Change	Addition	
CITY-ST-ZIP			CITY-	ST-ZIP	4/1/	CIW			-
TITLE NAME		Delete	TITLE		V		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP			STRE	ET ADDRESS ST-ZIP					
TITLE		☐ Delete	TITLE	į.			☐ Change	Addition	1
NAME STREET ADDRESS			NAME STREE	T ADDRESS					
CITY-ST-ZIP				ST-ZIP					
indicated of the cor	pertify that the information supplied wit on this report or supplemental report is poration or the receiver or trustee emp or on an attachment with an address,	s true and accurate and that me cowered to execute this report a	nv signat	ure shall have to ed by Chapter	ne same le 607, Florid	egal effect as if made under oath; the la Statutes; and that my name appea	at I am an office ars in Block 11 c	r or director or Block 12 if	
SIGNAT	URE: SIGNATURE AND TYPES OR	Winder OUR	ED DR DIRECTO	OR OC	T.9	2000 407-8	234-06 Daytime Phone #	,22_	