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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 303109

C & C ENVIRO, INC.

TITLE

NAME STREET ADDRESS CITY-ST-ZIP

Principal Place of Business Mailing Address 7 SUKOSHE LANE 7 SUKOSHE LANE ISLAMORADA FL 33036-3909 ISLAMORADA FL 33036 3. Date Incorporated or Qualified 3a. Date of Last Report 03/18/1966 03/15/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 59-1141157 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CARPER, LARRY B. 7 SUKOSHI LANE 82 Street Address (P.O. Box Number is Not Acceptable) ISLAMORADA FL 33036 83 84 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 (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELL'IE Change ____ Addition TITLE 1.1 100.0 CARPER, LARRY B. 1.2 NAME NAME **7 SUKOSHI LANE** 1.3 STREET ADDRESS STREET ADDRESS ISLAMORADA FL CITY-ST-ZIP 1.4 CITY - \$T - ZIP DETFIE Change Addition TITLE 2.1 1/ILE CARPER, ARLENE 2.2 NAME NAME STREET ADDRESS 7 SUKOSHI LANE 2.3 STREET ADDRESS ISLAMORADA FL CITY-ST-ZIP 2. 4 CITY - ST- ZIE DELETE Change Addition TITLE 3.1 1006 CARPER, LARRY L 3.2 NAMI NAME 51 CORAL DR. 3.3 STREET ADDRESS STREET ADDRESS **KEY LARGO FL** CITY-ST-ZIP 3.4 CDY-S1-ZIP DELETE Addition 4 1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4 4 C(1Y - S1 - Z)F DELETE TITLE 5.1 TITLE ☐ Change Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(11Y - \$1 - Z)P DELETE Change Addition

14. I do hereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

6.4 C(1Y - S1 - ZIP

6.1 THE