FILED 2001 UNIFORM BUSINESS REPORT (UBR) Mar 13, 2001 8:00 am Secretary of State **DOCUMENT # 303109** 1. Entity Name C & C ENVIRO, INC. 03-13-2001 90309 009 ***150.00 Principal Place of Business Mailing Address 7 SUKOSHI LANE 7 SUKOSHI LANE ISLAMORADA FL 33036 ISLAMORADA FL 33036 US rincipal Place of Business DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1141157 Not Applicable \$8.75 Additional 5. Certificate of Status Desired HLANDS Fee Required New Registered Agent 6. Name and Address of Current Registered Agent CARPER, LARRY B. 7 SUKOSHI LANE ISLAMORADA FL 33036 se of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity its this statemer SIGNATURE ure required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State GES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Delete TITI F TITLE NAME NAME CARPER, LARRY B. STREET ADDRESS STREET ADDRESS 7 SUKOSHI LANE CITY-ST-ZIP CITY-ST-7IP ISLAMORADA FL ☐ Change ☐ Addition Delete TITLE TITLE S NAME NAME CARPER, ARLENE STREET ADDRESS STREET ADDRESS 7 SUKOSHI LANE CITY-ST-ZIP CITY-ST-ZIP <u>ISLAMORADA FL</u> Addition ☐ Change TITLE Defete TITLE~ NAME NAME CARPER, LARRY L STREET ADDRESS STREET ADDRESS 51 CORAL DR. CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with SIGNATURE:

G OFFICER OR DIRECTOR