

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 534986

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: C.C.F. INDUSTRIES, INC.

**Current Principal Place of Business:**

1680 NW 95 AVE.  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

1680 NW 95 AVE.  
MIAMI, FL 33172

**New Mailing Address:**

FEI Number: 59-1769009

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRESHMAN, JERALD A.  
2 DATRON CENTER  
9130 S. DADELAND BLVD. #1701  
MIAMI, FL 33156 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LIDA, STEVE,  
Address: 14021 SW 104 PLACE  
City-St-Zip: MIAMI, FL 33176

Title: VP ( ) Delete  
Name: LIDA, MONA,  
Address: 14021 SW 104 PLACE  
City-St-Zip: MIAMI, FL 33176

Title: SEC ( ) Delete  
Name: LIDA, ERIC J,  
Address: 8545 SW 147 STREET  
City-St-Zip: MIAMI, FL 33158

Title: TREA ( ) Delete  
Name: LIDA, CARYN M,  
Address: 9021 SW 94 STREET #303  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MONA LIDA

VP

01/04/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date