## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

City & State

Zip

23

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 547417

(6)

C & P PROPERTIES MANAGEMENT AND INVESTMENT, INC.

Country

9. Name and Address of Current Registered Agent

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Principal Place of Business	Mailing Address	I INSIDI DIGIL GERIL BIRE) (ING) ING	
3971 S.W. 8TH ST., 8TE, 205 MIAMI FL 33134	3971 S.W. 6TH ST., STE. 205 MIAMI FL 33134-2950		
		3. Date incorporated or Qualified 09/15/1977	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	
21	26	59-1849013	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		

City & State

 $Z_{\rm ID}$ 

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## FILED Mar 14 1997 8:00am Secretary of State



Yes No

1-305-444-6716

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

3/10/97

3a. Date of Last Report 04/08/1996

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

CAR	RERA-JUSTIZ, ELVIRA		81	Name		1
3971 S.W. 8TH ST., STE. 205		82	Street	Address (P.O. Box Number is Not Acceptable)	1	
MIAI	MI FL 33134			01.00,	The state of the s	]
	,		83			
			84	City	<b>85</b> Zip Code	1
			[ ]		FL	
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. Familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered agent and tilled applicat	o-c (NOTL BI	ogistereo Age	nt s gnature	required when reinstalling) DATE	İ
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	100
TITLE	VSD	DELETE	1.1 TITLE		Change Addition	6
NAME	LARRIEU, MANUEL A.		1.2 NAME			12
STREET ADDRESS	3971 SW 8TH STREET, #205		1.3 STREET	ADDRESS		Ö
CITY-ST-ZIP	MIAMI FL	- <u></u>	1.4 CiTY-S	1 - <b>Z</b> IP		CR2E034 (9/96)
TITLE	PTD	□ DELETE	2111111		Change Addition	O
NAME	LARRIEU, JORGE A.		2.2 NAME			
STREET ADDRESS	3971 SW 8TH STREET, #205		2.3 STREET	ADDRESS		}
CITY-ST-ZIP	MIAMI FL		2 4 CHY-5	ST - ZIP		
TITLE	D	DELETE	3 1 THLE		Change Addition	
NAME	LARRIEU, RENE P.		3.2 NAME	l		
STREET ADDRESS	3971 SW 8TH STREET, #205		3.3 STREET	ADDRESS		)
CITY-ST-ZIP	MIAMI FL 33134		3 4. CHTY - S	1 - 7IP		
TITLE	D	☐ DELETE	4 1 TITLE	j	Change Addition	-
NAME	LARRIEU, GLORIA M.		4. 2 NAME			
STREET ADDRESS	3971 SW 8TH STREET, #205		4.3 STREET	ADDRESS		}
CITY-ST-ZIP	MIAMI FL 33134		4.4 CITY - S	- 7IP		_
TITLE		DELETE	51 THEE		Change Addition	ļ
NAME			5.2 NAME			1
STREET ADDRESS			5.3 STREFT	ADDRESS		}
CITY-ST-ZIP		1	5.4 CITY - S	T-ZIP		
, TITLE		DELETE	61 TITLE	{	Change Addition	ł
NAME			6.2 NAME	ļ		}
STREET ADDRESS			6.3 STRECT	ADORESS		
CITY-ST-ZIP		J	6.4 CITY - S		1. D. 1	.]
14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this arrifulal report or suppliemental 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 projection 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 12 or granted, or on an authority with an address.						

Country

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