2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # F03000006133

C & B CONSULTING CORP. OF NEW YORK



Principal Place of Business

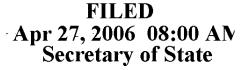
Mailing Address

3047 S ATLANTIC AVE

APT 1701 DAYTONA BEACH SHORE, FL 32118 3047 S ATLANTIC AVE

APT 1701

DAYTONA BEACH SHORE, FL 32118





DO NOT WRITE IN THIS SPACE

No Chg-P 03262006

CR2E034 (11/05)

4. FEI Number **NOT APPLICABLE**

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FRASER, WILLIAM

DO NOT WRITE

APT 1701 DAYTONA BEACH, FL 32118			IN THIS SPACE	
8. The above the obligat	named entity submits this statement for the ptions of registered agent.	ourpose of changing its registered o	office or registered agent, or both,	in the State of Florida I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title in	f applicable (NOTE, Registered Agr	ent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.	- A77	
10.	OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP FRASER, WILLIAM 3047 S ATLANTIC AVE, APT 1701 DAYTONA BEACH SHORES, FL 321 VCVP FRASER, CATHY 3047 S ATLANTIC AVE, APT 1701 DAYTONA BEACH SHORES, FL 321			U00000539472 05/09/06-80100-018 150.00
TITLE NAME STREET ADDRESS CITY-ST-DP	DATIONA BEACH SHURES, FL 321	18	DO N	NOT WRITE
TITLE NAME STREET ADDRESS CITY+ST-7IP			IN T	HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE MAME STREET ADDRESS				

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 further certify that the information indicated on this report or suppliers that 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 if the steep on some vector to the corporation or the receiver if the steep on the steep of the corporation or the receiver if the steep of the ste

SIGNATURE:

CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #