FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Socretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

F95000002537 (7)

CCLC COMPANY

				<u> </u>	
Principal Place	of Business	Mailing Address		E CORNEGO ANTO CONOT ENHA CONTRACTOR	ADINI ADINI BENTA NIDAY DININA NINY 1981 1981
300 S. FOURTH STREET 300 S. FOURTH STRI SUITE 1100 SUITE 1100 LAS VEGAS NV 89101 LAS VEGAS NV 89101					
2. Principal Dis	ice of Business			3. Date Incorporated or Qualified 05/24/1995	3a. Date of Last Report
1	==:	2a. Mailing Address 26		4. FEI Number 88-0320808	Applied For Not Applicable
Stifte, Apt. # 2	, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & State		City & State		Election Campaign Financing Trust Fund Contribution	□ \$5.00 May Be
	Country 25	7ip	Country	8. This corporation has liability for in	rtangible tax under s 199.032,
1	9. Name and Address of Curi		30	Florida Statutes Yes 10. Name and Address of New Re	
			81 Name		Aistalen Wöellt
C T CO	RPORATION SYSTEM		82 Street	Address (P.O. Box Number is Not Acceptable	
	OUTH PINE ISLAND ROAD		UZ CITOSI I		3)
PLANTA	TION FL 33324		83		
			84 City		85 Zip Code
1. Pursuant to	the provisions of Sections 607.05	02 and 607 1509. Florido Cua			
or registore	d agent, or both, in the State of Fig. and accept the obligations of, Se	orida. Suoti change was autho	rutes, the above-hamed co prized by the corporation's	orporation submits this statement for the purp board of directors. I hereby accept the appoi	ose of changing its registered office introductions as registered agent. I am
IGNATURE	i, and accept the obligations of, Se	sction 607.0505, Florida Statu	tes.	, , , , , , , , , , , , , , , , , , , ,	agom / am
5,	il I intoje i typied or printe il name oli registime Lag	end and tree diapplicable.	(NOTE Rogistered Agent signature n	Ricared when reinstating	DATE
2.		IND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
ILF	PD	DÉLETE	1. 1 TITLE		Change Addition
Mi	WEBSTER, CURTIS K	T. 000	1.2 NAME		
REFLADORESS	645 FIFTH AVENUE, 8TH I	FLOUR	13 STHEEL ADDRESS	300 South Fourth St., S	Suite 1100
Y SI-ZIP	NEW YORK NY 10022 EVT	DELETE	1 4 City - St - ZiP	Las Vegas, NV 89101	
ME .	SEXTON, KEVIN W		2 1 TITLE	-	Change
RELEADURESS	645 FIFTH AVENUE, 8TH I	FLOOR	2.2 NAME	000 Coult Devent on a	
r-St ZiP	NEW YORK NY 10022	20011		300 South Fourth St., S	Suite 1100
LF	VS	DELETE	3 1 TITLE	Las Vegas, NV 89101	Change Addition
ME	DONOVAN, DARIENNE J		3 2 NAME		Carlotte D Addition
PELL ADDRESS	645 FIFTH AVENUE, 8TH I	FLOOR	3.3 STREET ADDRESS	300 South Fourth St., S	hilto 1100
Y - ST - ZIF	NEW YORK NY 10022		3.4 C(TY-ST-Z(P	Las Vegas, NV 89101	uite iioo
LF.	D OTERNICAN AIR AGAIL	DELETE	4. 1 TITLE		Crange 🔲 Addition
ME	STEPHENSON, NELSON L		4 2 NAME		
REFT ADDRESS	645 FIFTH AVENUE, 8TH F NEW YORK NY 10022	-LUUK		300 South Fourth St., :	Suite 1100
Y-ST-ZIF	D D TONK NT 10022	DELETE	4 4 C/TY - ST - Z/P	Las Vegas, NV 89101	
ME	MILLER, MONTE L	L.J oct.cit	5 1 TITLE 5 2 NAME		Change Addition
HELL ADDRESS	300 S. FOURTH STREET, S	SUITE 1100	5 2 NAME 5 3 STREET ADDRESS		
Y \$1-ZiP	LAS VEGAS NV 89101		54 CITY-ST-ZIP		
LF .	D	DELFTE	6 1 TITLE		Change Addition
Mt	MILLER, GLEN		6 2 NAME		
HEFT ACORESS	200 WEST MADISON STRE	ET	6.3 STREET ADDRESS		
'∀ SI-ZIP	CHICAGO IL 60606		6 4 CITY - ST - ZIP		
certify that to	ceruly that the information supplied le information indicated on this ani	f with this filing is voluntarily fu iua' report or supplemental ar	rnished and does not quali	fy for the exemption stated in Section 119.07 urale and that my signature shall have the sa	(3)(k), Florida Statutes. I further
oath; that La appears in F	im an officer or director of the corp flock 12 or Block 13 if changed, or	oration or the receiver or trus	tee empowered to execute	turate and that my signature shall have the sa this report as required by Chapter 607, Flori	da Statutes; and that my name
	1.	^		ne J Donovan	
IGNATU	1 <u>L</u>	4 / 1	<u> Darjen</u>	resident $\partial \cdot \partial \cdot 9 $	_