

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000728

Entity Name: C CUBED CORP.

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

1040 SW 10TH AVENUE
POMPAÑO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

PO BOX 611052
POMPAÑO BEACH, FL 33061

New Mailing Address:

FEI Number: 35-2209577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLAGHER, LISA M
4900 BAYVIEW DRIVE
25
FT. LAUDERDALE, FL 33308 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: GALLAGHER, LISA M PRES.
Address: 4900 BAYVIEW DRIVE, SUITE 25
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LISA GALLAGHER

PRES

04/03/2009

Electronic Signature of Signing Officer or Director

Date