FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 3:03

DOCUMENT # **H81865** **(8)**

1. Corporation Name
C. C. U., INC.

Principal Place of Business	Mailing Address
14028 SW 140 ST MIAMI FL 33157 US	14028 SW 140 ST MIAMI FL 33157 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **10/22/1985**
3a. Date of Last Report: **04/05/1994**

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: **59-2629542** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

~~SOLOVE, ROBERT A.~~
~~COURTHOUSE TOWER, SUITE 1100~~
~~44 WEST FLAGLER ST~~
~~MIAMI FL 33130~~

10. Name and Address of New Registered Agent

81 Name: Ben Walker Jr.
82 Street Address (P.O. Box Number is Not Acceptable): 14028 SW 140 Street
83:
84 City: Miami FL 85 Zip Code: 33186

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Ben Walker Jr., President — DATE: 3-20-95
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☐ Change ☐ Addition
NAME	WALKER, BENJAMIN H., JR	12 NAME	
STREET ADDRESS	13945 CARTEE RD	13 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	
TITLE	DVP	21 TITLE	DVP ☑ Change ☐ Addition
NAME	~~WALKER, BENJAMIN H., SR.~~	22 NAME	Nancy Walker
STREET ADDRESS	~~9441 SUNRISE DR~~	23 STREET ADDRESS	13945 Cartee Rd.
CITY-ST-ZIP	~~GREENBUSH MI~~	24 CITY-ST-ZIP	Miami, FL 33158
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	GRUDZIECKI, TERESA J.	32 NAME	
STREET ADDRESS	9450 EASTER ROAD	33 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP	
TITLE	T	41 TITLE	T ☑ Change ☐ Addition
NAME	~~WALKER, BENJAMIN H. JR.~~	42 NAME	Christopher Glass
STREET ADDRESS	~~10945 CARTEE RD~~	43 STREET ADDRESS	9272 SW 182 St.
CITY-ST-ZIP	~~MIAMI FL~~	44 CITY-ST-ZIP	Miami, FL 33157
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 corporation 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 13 if changed or added on an attachment with an address.

SIGNATURE: Benjamin H. Walker Jr. President — 3-20-95 — 305 251-1820
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0202506 CP