

K36202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

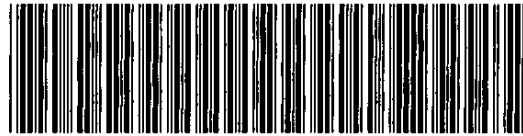
(Document Number)

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Change

12/10/07--01027--011 **35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR
12/31/07

*00789, 00721, 00611, 00524, 00672

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CNC TECHNOLOGY CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: K36202

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MANUEL L. CRESPO, ESQ.

(Name of Contact Person)

MANUEL L. CRESPO, ESQ., P.A.

(Firm/Company)

10765 SW 104 STREET

(Address)

MIAMI, FLORIDA 33176

(City/State and Zip Code)

For further information concerning this matter, please call:

MANUEL L. CRESPO, ESQ.

(Name of Contact Person)

at (305) 630-9966 X-207

(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2007

Manuel L. Crespo, Esq.
10765 SW 104 Street
Miami, FL 33176

SUBJECT: C. N. C. TECHNOLOGY CORP.
Ref. Number: K36202

We have received your document for C. N. C. TECHNOLOGY CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 007A00069821

RECEIVED

2007 DEC 28 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: C. N.-C. TECHNOLOGY CORP.
2. The principal office address: 7760 W. 20TH AVENUE HIALEAH, FL 33016
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10-04-1988 Document number: K36202
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

JUAN L. BRITO

7760 W. 20TH AVENUE HIALEAH, FL 33016

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

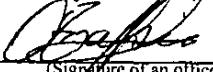
JUAN C. BOCOS

7760 W. 20TH AVENUE HIALEAH, FL 33016

(P.O. Box NOT acceptable)

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

ODALIS TAPIA PRES.

(Printed or typed name and title)

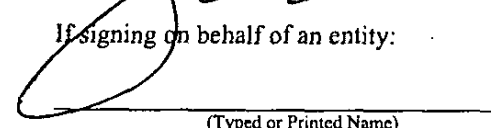
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

11-30-2007

(Date)

If signing on behalf of an entity:


(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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