

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

00 JAN 28 PM 3: 59

DOCUMENT # K88738

1. Corporation Name C.C. IMPEX INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 6991 N.W. 82ND AVE. BAY #9 MIAMI FL 33166 US

Mailing Address 6991 N.W. 82ND AVE. BAY #9 MIAMI FL 33166 US

3. Date Incorporated or Qualified 05/17/1989

21 62 Indian Trace

26 62 Indian Trace

4. FEI Number 65-0126119 Applied For Not Applicable

22 Suite # 175

27 Suite # 175

5. Certificate of Status Desired \$8:75 Additional Fee Required

23 Weston, FL

28 Weston, FL

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

24 33326 25 US

29 33326 30 US

8. This corporation owes the current year intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent PEREZ, MARIA A. 15249 NW 88 PLACE MIAMI FL 33016

10. Name and Address of New Registered Agent 81 Name Marcelino PEREZ 82 Street Address (P.O. Box Number is Not Acceptable) 643 Stanton Drive 83 84 City Weston FL 85 Zip Code 33326

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: Marcelino Perez DATE: 1/23/00

Table with 12 columns: OFFICERS AND DIRECTORS (12) and ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13). Rows include Perez, Maria A. and Marcelino Perez with fields for title, name, street address, city-st-zip, and change/addition options.

14. I hereby certify that the information supplied with this filing 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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] DATE: 4/18/99 (954) 349-2171

CR2E034 (11/198)