2005 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT May 05, 2005 08:00 AM Secretary of State DOCUMENT # L03000010032 C & P ENTERPRISES, L. L. C. Principal Place of Business Mailing Address 108 HALES RD. 108 HALES RD. AUBURNDALE, FL 33823 AUBURNDALE, FL 33823 US 05032005 No Chq-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2330630 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KEITH, WILLIAM C DO NOT WRITE 1517 COMMERCIAL PARK DR. LAKELAND, FL 33801 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS 9. MGR PEDONE, JEREMIAH NAME 108 HALES RD. STREET ADDRESS U00000362997 05/05/05-80139-020 50.00 CITY-ST-ZIP AUBURNDALE, FL 33823 NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE BITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY - ST - ZJP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

YPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE