2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000031551

1. Entity Name
C & B INVESTMENTS, L.L.C.

Principal Place of Business	Mailing Address
8730 49TH STREET NORTH PLAZA PINELLAS PARK, FL 33782 US	P.O. BOX 10836 ST. PETERSBURG, FL 33733 US

DO NOT WRITE IN THIS SPACE

03202007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number 20-1066016	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

DO NOT WRITE 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 _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

U00000688459
04/10/07-80082-022 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	HOANG, TUYET NGA THI
STREET ADDRESS	P.O. BOX 10836
CITY-ST-ZIP	ST. PETERSBURG, FL 33733
TITLE	MGR
NAME	HOANG, DUC THE
STREET ADDRESS	P.O. BOX 10836
CITY-ST-ZIP	ST. PETERSBURG, FL 33733
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida 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 if 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.

SIGNATURE: _____   4/01/07   (727) 743-8853
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #