

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000013457

FILED
Jul 10, 2007
Secretary of State

Entity Name: C & G ENTERPRISES, L.L.C.

Current Principal Place of Business:

9669 118TH LANE
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

9669 118TH LANE
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 20-4299715 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BLUM, CARL
9669 118TH LANE
SEMINOLE, FL 33772 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BLUM, CARL
Address: 9669 118TH LANE
City-St-Zip: SEMINOLE, FL 33772

Title: MGR () Delete
Name: BLUM, GAIL
Address: 9669 148TH LANE
City-St-Zip: SEMINOLE, FL 33772

Title: MGR () Delete
Name: STEC, CHESTER
Address: 7391 PRINCETON
City-St-Zip: BARTLETT, IL 60103

Title: MGR () Delete
Name: STEC, EVA
Address: 7391 PRINCETON
City-St-Zip: BARTLETT, IL 60103

Title: MGR () Delete
Name: BLUM, GLEN
Address: 6224 WESTERN AVE
City-St-Zip: WILLOWBROOK, IL 60527

Title: MGR () Delete
Name: BLUM, VIVIAN
Address: 6224 WESTERN AVE
City-St-Zip: WILLOWBROOK, IL 60527

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: CARL BLUM

RA

07/10/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date