

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90133 011 ***139.00

DOCUMENT # L07000048346

1. Entity Name
C & C PETRO-INVESTMENTS, LLC



Principal Place of Business 3610 SOUTH OCEAN BLVD. #409 SOUTH PALM BEACH, FL 33480 US	Mailing Address 3610 SOUTH OCEAN BLVD. #409 SOUTH PALM BEACH, FL 33480 US
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2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

02042008 Chg-LLC CR2E083 (12/06)

4. FEI Number **87-0801277** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GONZALEZ, CARLOS A
3610 SOUTH OCEAN BLVD.
#409
SOUTH PALM BEACH, FL 33480**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGRM** ☐ Delete
NAME **GONZALEZ, CARLOS A**
STREET ADDRESS **3610 SOUTH OCEAN BLVD., #409**
CITY-ST-ZIP **SOUTH PALM BEACH, FL 33480**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: Carlos A. Gonzalez
AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date 2-9-08 Daytime Phone #