FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DO(1. Corp

(0)

FILED Mar 11 1997 8:00am Secretary of State

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CUMENT # oration Name	L30023	

C & C CONSULTING GROUP, INC.

Principal Prace of Business Mailing Address					***************************************				
% MARIA DEL 7476 S.W. 1121 MIAMI FL 3317		% Maria del Carmen Cabrera 7476 S.W. 112th Pl Miami fl 33173-2638							
						 Date Incorporated or Qualified 11/14/1989 	3a. Date of 02/08/		eport
2. Principal Fi 21	ace of Business	2a. Mailing Address 26				4. FEI Number 65-0155698			plied For t Applicable
Suite, Apt ii 22	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$	8.75 / Fee Re	Additional equired
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		5.00 Added 1	May Be to Fees
Zip	Country	Zip		intry	,	8. This corporation has liability for i	ntangible tax (. 199.032,
24	25 9. Name and Address of Currer	29 nt Registered Agent	30	T		Florida Statutes 10. Name and Address of New Re			**************************************
DEL	CARMEN CABRERA, MARIA			81	Name	19. 11.11.11.11.11.11.11.11.11.11.11.11.11	g		
7476	8 S.W. 112TH PL			82	Street /	Address (P.O. Box Number is Not Acceptab	ole)	#1##**********************************	
MIAI	MI FL 33173			83					
				84	City		8	Zip '	Code
					· · · · · · · · · · · · · · · · · · ·	corporation submits this statement for the p	<u> </u>	<u>l '</u>	
agent Far SiGNATURE	m familiar with land accept the oblig	pations of, Section 607.0505, F	lorida Sta	tutes	S.	poration's board of directors. I hereby accep		nent as	registered
	Signature: typed or printed name of registered ag			d Age	entangia Ins	required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	FOTOR	C IN 40
12.	D	ID DIRECTORS DELETE	13.	TI E		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	DEL CARMEN CABRERA, M.	beer it	1.2 N					Jilango	LL NOOMON
STREET ADORESS	7476 S.W. 112TH PL		1		ADDRESS	•			
CITY ST-ZIE	MIAMI FL				T-ZIP	•			
T TLF	D	☐ DELETE	21 T					Change	Addition
NAME	Cabrera, Julio, C		22 N	AME					
STREET ADORESS	7476 SW 112TH PLACE		235	TREET	ADDRESS	·.			
CHY-SI-769	MIAMI FL		2 4 0	ITY-S	ST-ZIP				
HUF		DELETE	311		•			Change	☐ Addition
NAME			32 N						
STREET ADDRESS					ADORESS				
CEY-S1-ZE DIT.E		DELETE	34. C	*********	ST-ZIP			Change	Addition
NAM		care it	4.21					o mango	71001001
STREET ADDRESS					ADDRESS				
CITY ST-ZIP					ST-ZIP				
1d.F		DELETE	5.1 T					Change	☐ Addition
NAMI			5.2 N	AME					
STREET ADDRESS			5.3 \$	TREET	ADDRESS				
COTY-ST-ZIP			5.4 C	ITY-S	ST-ZIP				
THE		DELETE	6.1 T	TLE				Change	Addition
NAV/			6.2 N	AME					
STREET ADDRESS			6.3 S	TREET	ADDRESS				

14. I do 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 truebee 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.

SIGNATURE:

305) 274-8450