SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

C & C ENTERPRISE OF PANAMA CITY, INC.

incipal Place of Business	Mailing Address
137 BECK AVE.	1137 BECK AVE.
PANAMA CITY FL 32401	PANAMA CITY FL 32401

FILED Sep 11 1997 8:00am Secretary of State



1137 BECK AVE. Panama City Fl 32401			1137 BECK AVE. Panama City Fl 32401						-					
PANAMA OILI	FL 32401		PANAMA (PANAMA CITT PL 32401					DO NOT WRITE IN THIS SPACE					
								3.	Date Incorporated	or Qualified	3a. Date	of Last Re	eport	
									03/16/1990		07/0	1/1996		
2. Principal Pl	lace of Busine	ess	2a. Mailing	Address				4.	FEI Number			Ap	plied For	
21			26						59-3004557			No	t Applicable	
Suite, Apt.	#, etc.		Suite, A	lpt. #, etc.				6	Certificate of Statu	s Desired		\$8.75		
22			27									Fee Re		
City & State	9		City & S	State				6.	Election Campaign	_	_	\$5.00		
23			28		1				Trust Fund Contrib			Added t		
Zip		Country	Zip		Cour	ıtry		8.	This corporation of				angible No	
24		25]	29 rrent Registered Ag	nent	30			10	Personal Property Name and Addres				1110	
	X, JOYCE	and Address of Co	Holit Hogistered Ag	Join .		81	Name	10.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,		
	33 BECK AV	Æ				_								
	T 10	/E.				82	Street A	ddress (P	P.O. Box Number is	Not Acceptab	16)			
í e	NAMA CITY	El 99401				83								
PAI	WIND VIII	1 L J270 I												
						84	City				FL	85 Zip (Code	
11 Pursuant t	to the provision	ons of Sections 607	.0502 and 607.1508, late of Florida, Such	Florida Statu	utes, the ab	ove	e-named o	corporatio	n submits this state	ment for the p		hanging it	s registered	
office or re	egistered age	ent, or both, in the S	itate of florida. Such bligations of, Section	change was	authorized	l by	the corp	oration's b	oard of directors. I	hereby accep	t the appo	intment as	registered	
•	iii (a iiiliiai wil	in, and accept the o	inigations of, Section	1007.0303, 1	ionda otak	1100	··							
SIGNATURE	Signature, typed o	or printed name of registers	d agent and title If applicable	le (NC	76 Registered	Age	int signature r	equired when	reinstating)		DATE			
12.		OFFICERS	AND DIRECTORS		13.				ADDITIONS/CHANC	SES TO OFFIC				
TITLE	D			DELETE	1.1 TIT	LF					l	Change	Addition	
NAME	COX, JO				1.2 NA	ME								
STREET ADDRESS		CK AVE., APT. #	8		1.3 ST	REET	ADDRESS							
CITY-ST-ZIP	PANAMA	CITY FL			1.4 CIT	Y- \$1	T-ZIP							
TITLE				DELETE	2.1 TIT	LE	ľ				L	Change	Addition	
NAME					2.2 NA	ME								
STREET ADDRESS					2.3 \$16	REET	ADDRESS							
CITY-ST-ZIP			<u></u>		2. 4 CI		ST-ZIP			<u> </u>		Chanca	Addition	
TITLE				DELETE	3.1 1(1		1				L	Change	Addition	
NAME					3.2 NA									
STREET ADDRESS							ADDRESS							
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NAME					4. 2 N/		1000000							
STREET ADDRESS							ADDRESS							
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TITLE				☐ bitte	52 NA		l				•			
NAME					•		ADDRESS							
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CITY-ST-ZIP				DELETE	5.4 CH 6.1 TH		n-Zir					Change	Addition	
TITLE					6.1 III						•			
NAME							ADDRESS							
STREET ADDRESS					i i									
CITY-ST-ZIP	<u> </u>		anting with this filing		6.4 CI			atod in Co	otion 110 07/2\/i\	Florida Statuto	c. I further	cortify that	the	

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing, or on an attachment with an address.

00/2.60