2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90248 047 ***150.00

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1. Entity Name
CNC AND ASSOCIATES, INC.

94075354

Principal Place of Business	Mailing Address
10447 S.W. 108TH AVENUE SUITE 270 MIAMI, FL 33176	P.O. BOX 163821 MIAMI, FL 33116

04282004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
12331 SW 110 S. CANAL ST. Rd.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI, FLORIDA	City & State:
Zip: 33186 Country: USA	Zip: Country:

4. FEI Number 26-0010527 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BOLLAR, CARLOS B 10447 S.W. 108 AVENUE SUITE 270 MIAMI, FL 33116	Name: SAME Street Address (P.O. Box Number is Not Acceptable): 12331 SW 110 S. Canal ST. Rd. City: MIAMI FL Zip Code: 33186

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BOLLAR, CARLOS B 10447 S.W. 108TH AVENUE MIAMI, FL 33176	☐ Delete	PRESIDENT CARLOS BOLLAR 12331 SW 110 S. CANAL STREET ROAD MIAMI-FL 33186	☑ Change ☐ Addition
		☐ Delete	VICE PRESIDENT CARMEN DEJU ELLMAN 12110 SW 96 ST MIAMI-FL 33186	☐ Change ☑ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carlos Bollar / PRESIDENT 4/26/04 (305) 273 7085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
CARLOS BOLLAR