

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000030712

Entity Name: CCI INDUSTRIES, INC.

FILED
Jan 08, 2004
Secretary of State

Current Principal Place of Business:

650 WEST AVENUE
SUITE 1409
MIAMI BEACH, FL 33139

Current Mailing Address:

650 WEST AVENUE
SUITE 1409
MIAMI BEACH, FL 33139

New Principal Place of Business:

650 WEST AVENUE
SUITE 2809
MIAMI BEACH, FL 33139

New Mailing Address:

650 WEST AVENUE
SUITE 2809
MIAMI BEACH, FL 33139

FEI Number: 02-0586020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHINNERER, KIM
650 WEST AVE.
SUITE 1409
MIAMI BEACH, FL 33139

Name and Address of New Registered Agent:

SCHINNERER, KIM
650 WEST AVE.
SUITE 2809
MIAMI BEACH, FL 33139

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:

01/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHINNERER, KIM
Address: 650 WEST AVE., SUITE 1409
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHINNERER, KIM
Address: 650 WEST AVE., SUITE 2809
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KIM SCHINNERER

CEO

01/08/2004

Electronic Signature of Signing Officer or Director

Date