2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2005 8:00 am Secretary of State

DOCUMENT # P02000090577 1. Entity Name C & W ENTERPRICES OF MIAMI CORP.					04-18-200	5 90570 012 ***1:	50.00	
Principal Place of Business		Mailing Address		30000	- 00			
495 E. 44TH ST		495 E. 44TH ST		20036	968			
HIALEAH, FL 33013		HIALEAH, FL 33013						
,								
Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc. City & State		٦				
				03302005	Chg-P	CR2E034 (10/03)		
City & State				4. FEI Number	г	Ap	plied For	
7-				46-0498	3529		t Applicable	
Zip	Country	Zip	Country	5. Certificate of	of Status Desired	S8.75 Add Fee Require		
	6 Name and Address of Curren	t Registered Agent		7. Name and	Address of New	Registered Agent		
			Name					
GARCIA, WILLIAM 0			Ctroot Address	Street Address (P.O. Box Number is Not Acceptable)				
495 E. 44TH ST HIALEAH, FL 33013			Street Address	Gr.O. Box Numbe	r is Not Acceptab			
TIMEEAH, PE 33013								
			City	 		Zip Cod	e	
O The miles						FL		
the obligat	e named entity submits this statement tions of registered agent.	for the purpose of changing its	registered office or registi	cred agent, or both	n, in the State of F	lorida. I am familiar with,	and accept	
	1/1/11/00 A					2/20/00	-	
SIGNATURE.	Signature, typed or printed name of registered ages	il and title d'applicable. (NOTE	: Registered Agent signature requir	red when reinstature)		<u> </u>	-	
		-						
				1				
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550	9. Election Campai Trust Fund Contr	· · · · · ·	5.00 May Be				
After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550 OFFICERS ANI	.00 Trust Fund Contr	· · · · · ·	ded to Fees	CHANGES TO OF	FICERS AND DIRECTORS	S IN 11	
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12. Thereby certify that the information supplied with this filling 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: 丛

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/05

786) 285-0959