2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000098929

FORT MYERS, FL 33905

City-St-Zip:

Entity Name: C&B AMERICAN INC.

FILED Jan 20, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
1214 ORTIZ AVE FORT MYERS, FL 33905			4901 PALM BEACH BLVD	
			FORT MYERS, FL 33905	
lailing Address	s:	New Mailing Addre	New Mailing Address:	
7 AVF		4901 PALM BEACH	BLVD	
FORT MYERS, FL 33905		SUITE # 17 FORT MYERS, FL 33905		
: 41-2059245	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:		Name and Address	Name and Address of New Registered Agent:	
IZ AVE ERS, FL 33905 e named entity s e of Florida.		ourpose of changing its registe	red office or registered agent, or both,	
Electronic Signature of Registered Agent			 Date	
P () NAIK, CHANDRA 1214 ORTIZ AVE FORT MYERS, F	ORS: Delete JEET R E L 33905	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title:	GES TO OFFICERS AND DIRECTORS: () Change () Addition () Change () Addition	
,		Name:		
	IZ AVE ERS, FL 33905 Iailing Address IZ AVE ERS, FL 33905 : 41-2059245 I Address of Ci ANDRAJEET R IZ AVE ERS, FL 33905 e named entity s e of Florida. RE: Electroni mpaign Financing S AND DIRECT P () NAIK, CHANDRA 1214 ORTIZ AVE FORT MYERS, F	IZ AVE ERS, FL 33905 Plailing Address: IZ AVE ERS, FL 33905 E 41-2059245 FEI Number Applied For () I Address of Current Registered Agent: ANDRAJEET R IZ AVE ERS, FL 33905 E named entity submits this statement for the period of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: P () Delete NAIK, CHANDRAJEET R 1214 ORTIZ AVE FORT MYERS, FL 33905 V () Delete PATEL, NARENDRA	AVE ERS, FL 33905 Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible to the purpose of Changing its register of Florida. Responsible	

City-St-Zip:

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: CJ P 01/20/2003