## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 14, 2008 08:00 Al Secretary of State DOCUMENT # P03000117052 C & R INVESTMENTS GROUP INC. Principal Place of Business Mailing Address 5522 NW 72ND AVE. 5522 NW 72ND AVE. MIAMI, FL 33166 US MIAMI, FL 33166 01042008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 51-0486684 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROSARIO, MIRIAM U DO NOT WRITE 16011 SW 104TH TER. MIAMI, FL 33196 IN THIS SPACE 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. Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees .10. OFFICERS AND DIRECTORS TITLE NAME ROSARIO, FELIX R STREET ADDRESS 16011 SW 104TH TER. CITY-ST-ZIP MIAMI, FL 33196 U00000781806 TITLE 01/15/08-80050-002 300.00 NAME ROSARIO, MIRIAM U STREET ADDRESS 16011 SW 104TH TER. CITY-ST-ZIP MIAMI, FL 33196 TITLE NAME CARMINATI, FRANCESCO 16011 SW 104TH TER. STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33196 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAMÈ STREET ADDRESS

12. I hereby certify that the information you blied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 of bustee 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:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/08

305.863.0105

FILED

Daytime Phone #