## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Feb 28, 2007 08:00 AM DOCUMENT # P04000086126 Secretary of State C & P ENTERPRISES OF SOUTH FLORIDA, INC. Principal Place of Business Mailing Address 15011 WINDOVER WAY 15011 WINDOVER WAY DAVIE, FL 33331 **DAVIE, FL 33331** CR2E034 (11/05) 02202007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PEREZ, LUIS DO NOT WRITE 15011 WINDOVER WAY **DAVIE, FL 33331** 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550:00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DPS TITLE PEREZ. DEBORAH NAME 15011 WINDOVER WAY STREET ADDRESS CITY-ST-7IP **DAVIE, FL 33331** TITLE U00000651185 03/08/07-80042-022 150.00 STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it all other like empowered. 12. I hereby certify that the information supplied with this indicated on this report or supplied pental report is true of the corporation or the receiver of trechanged, or on an attachment with ar

OF MIGNING OFFICER OR DIRECTOR

FILED