## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000082145

Entity Name: CC POWER ENTERPRISES, INC.

FILED Jan 22, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10511 SW 88TH ST., SUITE C-204 14230 SW 52 ST MIAMI, FL 33176 MIAMI, FL 33175

Current Mailing Address: New Mailing Address:

10511 SW 88TH ST., SUITE C-204 14230 SW 52 ST MIAMI, FL 33176 14230 SW 52 ST

FEI Number: 20-4151713 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SALAZAR, CARLOS CORTES, RAMON 10511 SW 88TH ST., SUITE C-204 14230 SW 52 ST MIAMI, FL 33176 US MIAMI, FL 33175 US

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: RAMON CORTES 01/22/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PD () Delete Name: SALAZAR, CARLOS

Address: 1250 SW 4TH ST., APT. 5
City-St-Zip: MIAMI, FL 33135

 Title:
 VD
 ( ) Delete

 Name:
 RUIZ, NIYOMAR V

 Address:
 27460 SW 137TH CT.

 City-St-Zip:
 MIAMI, FL 33032

Title: SD () Delete
Name: GONZALEZ, MAGDA
Address: 1250 SW 4TH ST., APT. 5

MIAMI, FL 33135

City-St-Zip:

Title: PD (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CORTES, RAMON
Address: 14230 SW 52 ST
City-St-Zip: MIAMI, FL 33175

Title: VPD (X) Change () Addition

 Name:
 PEREZ, CHRISTOPHER I

 Address:
 14230 SW 52 ST

 City-St-Zip:
 MIAMI, FL 33175

Title: STD (X) Change ( ) Addition

Name: PAREDES, CARLOS Address: 1533 MENDAVIA AVE City-St-Zip: MIAMI, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: RAMON CORTES PD 01/22/2006