2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000089743

Entity Name: CCB SERVICES, INC.

City-St-Zip:

NORTH MIAMI BEACH, FL 33179 US

FILED Jul 03, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
269 N. UNIVERSITY DR. SUITE "H"	269 N. UNIVERSITY DR. SUITE
PEMBROKE PINES, FL 33024 US	PEMBROKE PINES, FL 33024 US
Current Mailing Address:	New Mailing Address:
269 N. UNIVERSITY DR. SUITE "H"	269 N. UNIVERSITY DR. SUITE
PEMBROKE PINES, FL 33024 US	PEMBROKE PINES, FL 33024 US
FEI Number: 11-3711923 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
CASTANEDA, CAROL 1710 NE 191ST STREET APT 106 NORTH MIAMI BEACH, FL 33179 US	
The above named entity submits this statement for the purp in the State of Florida.	oose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
In accordance with s. 607.193(2)(b), F.S., the corporation did not rec Election Campaign Financing Trust Fund Contribution ().	ceive the prior notice.
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: P () Delete Name: CASTANEDA, CAROL Address: 1710 NE 191ST STREET, APT 106	Title: () Change () Addition Name: Address:

City-St-Zip:

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: CAROL CASTANEDA P 07/03/2006