

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000048361

FILED
Feb 07, 2008
Secretary of State

Entity Name: C & C PROPERTY INVESTMENTS, INC.

Current Principal Place of Business:

16647 FRESH MEADOW DRIVE
CLERMONT, FL 34714 US

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 20-4639519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD
SUITE 1050
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CRISTALDO, TERESA E
Address: 16647 FRESH MEADOW DRIVE
City-St-Zip: CLERMONT, FL 34714 US

Title: SD () Delete
Name: FERNANDEZ, FABIO A
Address: 16647 FRESH MEADOW DRIVE
City-St-Zip: CLERMONT, FL 34714 US

Title: VPD () Delete
Name: BARBI, ORNELLA F
Address: 300 VALLEY DR APT 33
City-St-Zip: MILBRAE, CA 94030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: BARBI, ORNELLA F
Address: 1850 - 36TH AVE.
City-St-Zip: SAN FRANCISCO, CA 94122

I hereby certify that the information supplied with this filing does not qualify 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: TERESA E. CRISTALDO

PD

02/07/2008

Electronic Signature of Signing Officer or Director

_____ Date