FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jul 25, 2002 8:00 am Secretary of State DOCUMENT # P93000029474 07-25-2002 90126 026 ***150.00 C AND D ENTERPRISES INTERNATIONAL, INC. Principal Place of Business Mailing Address ROUTE 7 BOX 541-B ROUTE 7 BOX 541-B LAKE CITY FL 32055 LAKE CITY FL 32055 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3175659 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KALB, CHARLES H Street Address (P.O. Box Number is Not Acceptable) ROUTE 7 BOX 541-B LAKE CITY FL 32055 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change | ☐ Addition NAME KALB, CHARLES H NAME STREET ADDRESS ROUTE 7, BOX 541-B STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32055 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME KALB, DEBBIE E NAME STREET ADDRESS ROUTE 7, BOX 541-B STREET ADDRESS .CITY-ST-ZIP LAKE CITY FL 32055 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Addition ☐ Change

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

AHachment KALB & ASSOCIATES Document # 6930000 29474

Route 7, Box 541-B Lake City, Florida 32055 130132323

Bus: (904) 755-1759

FAX: (904) 755-3944

Cand D Enturises Duternational Suc.
Pt. 7 B. 4 541-B

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32055

Dear Sirs,

Ilis is the first notice I received on His Corporate filing for this year.

Dane Dubnitting the original filing fee.

- Thank Ju.

Dehh T. Kult Vice President 7EI # 59-3175659