FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P94000020436

C & D RANCH, INC.

Mailing Address

Principal Place of Business 5226 S.W. LUDLUM STREET

5226 S.W. LUDLUM STREET

FILED Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90018 017 ***150.00



PALM CITY FL 34990		PALM CITY Ft 34990			DO NOT WRITE IN THIS SPACE	
	-				3. Date Incorporated or Qualifed 03/16/1994	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			65-0485277 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27			5. Certificate of Status Desired Fee Required	
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	1	8. This corporation owes the current year Intangible	
24	25	29 30	D	···-	Personal Property Tax. Yes No 10. Name and Address of New Registered Agent	
	9. Name and Address of Currer	t Registered Agent	81	Name	10. Name and Address of New Registered Agent	
DI IN	GEY, RICHARD J	₹	"	Name	·	
ି ଶ୍ରୀନ	i i 100 SOUTH FEDERAL HIGHWAY			Street Ad	dress (P.O. Box Number is Not Acceptable)	
	ART FL 34994		83			
0.0/	111 12 0-1001		63			
			84	City	85 Zip Code	
The second secon	·			L .	FL	
11. Pursuant to office or re agent. Lar	to the provisions of Sections 607.050 egistered agent, or both, in the State n familiar with, and accept the obliga	2 and 607.1508, Florida Statutes, of Florida. Such change was auth- tions of, Section 607.0505, Florida	, the abov norized by a Statutes	e-named co the corpora s.	propration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Re	egistered Age	nt signature requ	uired when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	DOMINGUEZ, CARLOS		1.2 NAME			
STREET ADDRESS	5226 S.W. LUDLUM STREET		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	PALM CITY FL 34990		1.4 CITY-S	ST-ZIP		
TITLE	VPS	☐ DELETE	2.1 TITLE		Change Addition	
NAME	DOMINGUEZ, DIANE		2.2 NAME		•	
STREET ADDRESS	5226 S.W. LUDLUM STREET		2.3 STREE	TADDRESS		
CITY-ST-ZIP	PALM CITY FL 34990	\$1555	2.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME	: 昭本 - 10 m -		3.2 NAME			
STREET ADDRESS	n de la companya di		3.3 STREE	TADORESS		
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		3.4. CITY-5	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS	- 15 - 15		4.3 STREE	TADDRESS		
CITY-ST-ZIP			4.4 CITY- S	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME		·	
STREET ADDRESS	35		5.3 STREE	TADDRESS		
CITY-ST-ZIP) - No. 1		5.4 CITY-S	ST-ZIP		
TITLE	Wash St.	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME	5003 S		6.2 NAME			
STREET ADDRESS			6.3 STREE	TADDRESS	•	
CITY-ST-ZIP			6.4 CITY-S	ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changes or on an attachment with an address, with all other like empowered.

561-221-0106