## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000067311

600 NE 36TH STREET

MIAMI, FL 33137

Address: City-St-Zip:

FILED Apr 29, 2008 Secretary of State

Entity Nar	ne: CTC CA	RGO, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
5255 COLI STE116 MIAMI, FL			5255 COLLINS AVE STE11C MIAMI BEACH, FL 3314	0 US	
Current M	ailing Addre	ss:	New Mailing Address:	New Mailing Address:	
5255 COLI 11-C MIAMI, FL			5255 COLLINS AVE STE11C MIAMI BEACH, FL 3314	0 US	
FEI Number:	65-0692868	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
CERVERA, CECILIA T 5255 COLLINS AVE STE 116 MIAMI BEACH, FL 33140 US			CERVERA, CECILIA T 5255 COLLINS AVE STE 11C MIAMI BEACH, FL 3314	5255 COLLÍNS AVE	
	named entity of Florida.	submits this statement for the p	urpose of changing its registered o	office or registered agent, or both,	
SIGNATURE:				04/29/2008	
	Electro	nic Signature of Registered Age	nt	Date	
Election Car	npaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( CERVERA, CE 5255 COLINS MIAMI, FL 33	AVE	Title: ( ) Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( MAGUIRE, ME 4423 ALTON F MIAMI BEACH	RD	Title: ( ) Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name:	D ( MAGUIRE, CH	) Delete RISTINA	Title: ( )	) Change ()Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CECILIA T. CERVERA 04/29/2008 D