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 # P97000078415 1. Corporation Name

300 C.C. PROPERTIES, INC.

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90082 013 ***150.00



Principal Place of Business	Mailing Address	· 	, T 100 HORY THE 10111 12511 SHILL OUTSILE SHILL 12511 12511 12511 12511 1251
7360 SW 24TH ST STE. 34 MIAMI FL 33155	7360 SW 24TH ST., STE, 34 MIAMI FL 33155		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualifed 09/10/1997
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21			APPLIED FOR 65-0861263 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Ziρ Country 24 25	Zip Co. 30	untry	8. This corporation owes the current year Intangible Personal Property Tax.
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent
ARGIMON, CONSTANTINO		81 Name	
7360 SW 24TH ST., STE. 34		82 Street Addr	ress (P.O. Box Number is Not Acceptable)
MIAMI FL 33155		83	
•		84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE □ DELETE 1.1 TITLE ☐ Change ☐ Addition BENJAMIN ACARADO NAME 1.2 NAME 7360 SW 24 ST #34 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33155** CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition ☐ DELETE Change TITLE 2.1 TITLE CONSTANTINO ARGIMON NAME 2.2 NAME 73610 SW 24 ST # 34 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33155 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ☐ DELETE TITLE ☐ Change Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-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 changed, or often attachment with an address, with all other like empowered.

SIGNATURE:



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CR2E034 (11/98)