

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 # P97000105377

1. Corporation Name

CPC INVESTMENT BANKING GROUP, INC.

Principal Place of Business

~~1101 BRICKELL AVE #1202~~
~~MIAMI FL 33131~~
~~US~~

Mailing Address

~~757 S.E. 17TH ST., STE. 105~~
~~FORT LAUDERDALE FL 33316~~

2. Principal Place of Business

21 444 BRICKELL AVE.

2a. Mailing Address

26 444 BRICKELL AVE

Suite, Apt. #, etc.

22 51140

Suite, Apt. #, etc.

27 51140

City & State

23 Miami, FL

City & State

28 Miami, FL

Zip

24 33131

Country

25 US

Zip

29 33131

Country

30 US

9. Name and Address of Current Registered Agent

~~KAHL, MICHAEL~~
~~5870 NE 22ND AVE~~
~~FT LAUDERDALE FL 33308~~

3. Date Incorporated or Qualified

12/15/1997

4. FEI Number

65-0809688

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing



Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.



Yes



No

10. Name and Address of New Registered Agent

81

Name

STARR, BRENT

82

Street Address (P.O. Box Number is Not Acceptable)

1602 ALTON RD.

83

SUITE 447

84

City

MIAMI BEACH

FL

85

Zip Code

33139

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/15/99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME KAHL, MICHAEL
STREET ADDRESS 757 S.E. 17TH ST., STE. 105
CITY-ST-ZIP FORT LAUDERDALE FL 33316

TITLE D ☒ DELETE

NAME HUBER, MARCEL
STREET ADDRESS 757 S.E. 17TH ST., STE. 105
CITY-ST-ZIP FORT LAUDERDALE FL 33316

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] STARR, BRENT Dir. 2/15/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

U231/99C

FILED
Mar 05, 1999 8:00 am
Secretary of State

03-05-1999 90010 048 ***158.75



DO NOT WRITE IN THIS SPACE