May 06, 1999 8:00 am Secretary of State

05-06-1999 90153 007 \*\*\*150.00

## 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 # P9800004424

1. Corporation Name

C & G FLORIDA ENTERPRISES, INC.

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Principal Place of Busine	Mailing Address				t deniver ine ibibi terir bein bein ebit ebit best bibi bibi bibi bibi bibi bibi	Д	
9232 SW 167J COURT MIAMI FL 33196		9232 SW 167J COURT MIAMI FL 33196					
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	$\neg$
						01/14/1998	
2. Principal Place of Bus	iness	2a. Maili	ng Address			4 EEI Number	ᅱ
21		26				65-08053 99 Not Applicable	ie
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired  \$8.75 Additional	
22		27				Fee Required	4
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	1
23	Country	Zip		Country		Trust Fund Contribution Added to Fees	$\dashv$
Zip	Country 25	29	30	_ `		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No	ı
9. Nam	e and Address of Current			<u> </u>		10. Name and Address of New Registered Agent	$\dashv$
		<u> </u>		81	Name	CANO, JOSE	
CANO, JOSE				82	Street		$\dashv$
9232 SW 167				42	et Address (P.O. Box Number is Not Acceptable) 2-32-5-W-167-CT		
MIAMI FL 331	96			83		<del></del>	
				84	City	85 Zip Code	-
		١,			}	MIAMI FL 33196	
11. Pursuant to the prov	isions of Sections 607.0502	and 607.150	08, Florida Statutes,	, the abov	e-named the com	ed corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered	I
agent. I am familiar	with, and accept the obligati	ons of, Secti	on 607.0505, Florid	a Statutes		1.110/00	
SIGNATURE	WE CULT	<u> </u>				The required when reinstation)	}
Signature, typ	ed or printed name of registered agent OFFICERS ANI			egistered Age	nt signature i	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	$\dashv$
TITLE	OFFICERS AND	DINCOTOR	DELETE	1.1 TITLE		PRESIDENT Change XAdditi	ion
NAME			<del></del>	1.2 NAME		JOSE A. CANO	ļ
STREET ADDRESS					TADDRESS		
CITY-ST-ZIP				1.4 CITY-S		MIAMI, FL 33196	
TITLE			☐ DELETE	2.1 TITLE		TREASURER / SECRETARY Change Additi	ion
NAME				2.2 NAME		MARIELA M. CANO	- 1
STREET ADDRESS				2.3 STREE	TADDRESS	The state of the s	
CITY-ST-ZIP				2.4 CITY-5	ST-ZIP	MIAMI, FL 33196	
TITLE			☐ DELETE	3.1 TITLE		☐ Change ☐ Additi	ion
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREE	T ADDRESS	38	Ì
CITY-ST-ZIP				3.4. CITY-5	T-ZIP		_
TITLE			☐ DELETE	4.1 TITLE		☐ Change ☐ Additi	ion
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREE	T ADDRESS	35	1
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NAME				5.2 NAME			ł
STREET ADDRESS					T ADDRESS	72	
CITY-ST-ZIP			☐ DELETE	5.4 CITY-S 6.1 TITLE	1-212	☐ Change ☐ Additi	ion
TITLE			☐ NELETE	6.1 HILE 6.2 NAME		Colonige   Acoust	۱.
NAME expect annuese					T ADDRESS	ss	
STREET AUDRESS!						:= 1	

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS