

DOCUMENT # P98000039167

1. Entity Name  
C&C OF BROWARD, INC.

Principal Place of Business  
6316 POWERLINE ROAD  
FORT LAUDERDALE FL 33309  
US

Mailing Address  
6316 POWERLINE ROAD  
FORT LAUDERDALE FL 33309  
US

2. Principal Place of Business

6316 Powerline Rd Ft Land  
Suite, Apt. #, etc.

3. Mailing Address

6316 Powerline Rd.  
Suite, Apt. #, etc.

City & State  
FT LAND

Country  
Broward

City & State  
FL

Country  
Broward

4. FEI Number 65-0849519

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CLAUSEN, DREW S  
8036 NW 28 PLACE  
SUNRISE FL 33322

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Lee Chang*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-8-01

9. This corporation is eligible to satisfy its intangible  
tax filing requirement and elects to do so.  
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME CHANG, LEE  
STREET ADDRESS 6190 WOODLAND BLVD #106  
CITY-ST-ZIP TAMARAC FL 33319

TITLE D ☐ Delete  
NAME CHANG, JERRY  
STREET ADDRESS 6190 WOODLAND BLVD #106  
CITY-ST-ZIP TAMARAC FL 33319

TITLE D ☐ Delete  
NAME CLAUSEN, DREW S  
STREET ADDRESS 8036 NW 28 PLACE  
CITY-ST-ZIP SUNRISE FL 33322

TITLE D ☐ Delete  
NAME CLAUSEN, GREGG  
STREET ADDRESS 718 SW 73 AVENUE  
CITY-ST-ZIP NORTH LAUDERDALE FL 33068

TITLE D ☐ Delete  
NAME CHANG, ANGELA  
STREET ADDRESS 6190 WOODLANDS BOULEVARD #207  
CITY-ST-ZIP TAMARAC FL 33319

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition  
NAME Chang Lee  
STREET ADDRESS 6835 NW 24 Ter  
CITY-ST-ZIP FT LAND FL 33309

TITLE D ☒ Change ☐ Addition  
NAME Chang Jerry  
STREET ADDRESS 6835 NW 24 Ter  
CITY-ST-ZIP FT LAND FL 33309

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lee Chang* LEE CHANG 1-8-01 (954) 789-9198  
Typed or Printed Name of Signing Officer or Director Date Daytime Phone #