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 # P98000099370

1. Corporation Name

CC ANTIQUITIES, INC.

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90012 019 ***158.75



| Principal Place | e of Business | Mailing Address | | , | | |
|---|----------------------------------|---|--------------------|--|---------------|--|
| 3025 NORTH OC | EAN BOULEVARD | 3025 NORTH OCEAN BOULEVAL | RD | | | |
| FORT LAUDERDA | ALE FL 33308 | FORT LAUDERDALE FL 33308 | | DO NOT WRITE IN THIS SPACE | | |
| | | | | 3. Date Incorporated or Qualifed | | |
| | | | | · _ | | |
| 3 Bringing D | ace of Business | 2a. Mailing Address | - | 11/25/1998 4. FEI Number | oplied For | |
| Z. Philiopai Fi | コー つんけ ししょう | — ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | Hat Com | | ot Applicable | |
| Suite, Apt. | # etc | 26 Suite, Apt. #, etc. | W COUX | \$8.75 | Additional | |
| 22 | m, 010. | 27 | | LE Contiforto of Statue Desired 199 | equired | |
| City & State | 9 | City & State | | 6. Election Campaign Financing _ \$5.00 | May Be | |
| 23 OAKL | | 28 OAKLAND PA | De FL | • • • • • • • • • • • • • • • • • • • | to Fees | |
| Zip | Country | Zip | Country | 8. This corporation owes the current year Intangible | | |
| 24 3333 | 34 [25] USA | 29 33333 4 30 | USA | Personal Property Tax. | □No | |
| <u> </u> | 9. Name and Address of Current I | Registered Agent | <i>'</i> | 10. Name and Address of New Registered Agent | | |
| 81 Name OUDISTINE KENNEDY | | | | | | |
| ERDMAN, CARRIE | | | | Iress (P.O. Box Number is Not Acceptable) | | |
| 3025 NORTH OCEAN BOULEVARD | | | | 720 NE 34th Court | | |
| FORT LAUDERDALE FL 33308 | | | | | | |
| | | | 94 6340 | 85 Zip | Code | |
| | | | 84 Ciby) y | みKUAND PARK FL º 3 | Code 33334 | |
| 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. | | | | | | |
| (1) (1) (1) (1) (1) (2) (3) (3) (4) (4) (4) | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agencind the if applicable. (NOTE-Registered Agent signature required when reinstating) | | | | | | |
| 12. | OFFICERS AND | 100 | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTO | | |
| TITLE | D | M DELETE | 1.1 TITLE | Director | Addition | |
| NAME | ERDMAN, CARRIE | | 1.2 NAME | BAIER/UWE, O. I | | |
| STREET ADDRESS | 3025 NORTH OCEAN BOULEVAR | D | 1.3 STREET ADDRESS | 720 NE 34th Court | ., | |
| CITY-ST-ZIP | FORT LAUDERDALE FL 33308 | | 1.4 CITY-ST-ZIP | OAKLAND PACK FL 333 | | |
| TITLE | D | ☐ DELETE | 2.1 TITLE | P/T/D+ Registered Agont Change | ☐ Addition | |
| NAME | KENNEDY, CHRISTINE | | 2.2 NAME | KENNEDY CHRISTINE | | |
| STREET ADDRESS | 3025 NORTH OCEAN BOULEVAR | D | 2.3 STREET ADDRESS | TO NE 34th Court | - | |
| CITY-ST-ZIP | FORT LAUDERDALE FL 33308 | | 2.4 CITY-ST-ZIP | Dakland Park Fl 32334 | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | Change | ☐ Addition | |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | and the second second | 7881 | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | Change | Addition | |
| NAME | | | 4. 2 NAME | , n - | | |
| STREET ADDRESS | , · | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | | |
| TITLE | | [] DELETE | 5.1 TITLE | ☐ Change | ☐ Addition | |
| NAME | | | 5.2 NAME | | } | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | / / | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | ☐ Change | Addition | |
| NAME | → | | 6.2 NAME | | | |
| STREET ADDRESS | <i>*</i> | | 6.3 STREET ADDRESS | / ' | | |
| CITY-ST-ZIP | | | 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 on an attachment with an address, with all other like empowered.

SIGNATURE: