2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024365

FILED Jan 18, 2004 Secretary of State

Entity Name: CC TRENCHING CORP. **Current Principal Place of Business: New Principal Place of Business:** 4762 GLADIATOR CIRCLE LAKE WORTH, FL 33463 **Current Mailing Address: New Mailing Address:** 4762 GLADIATOR CIRCLE LAKE WORTH, FL 33463 FEI Number: 65-0902949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A 1840 SOUTHWEST 22 STREET 4TH FLOOR MIAMI, FL 33145 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete Title: () Change () Addition CHIPPY, CLIFFORD L Name: Name: 4762 GLADIATOR CIRCLE Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: Title: () Delete Title: PSTD () Change (X) Addition Name: Name: CHIPPY, CLIFFORD L PSTD Address: Address: 4762 GLADIATOR CIRCLE LAKEWORTH, FL 33463 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CLIFFORD CHIPPY PSTD 01/18/2004