

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -3 PM 4: 36

DOCUMENT # S79485 (6)

1. Corporation Name

C.C. RIDER INC.

Principal Place of Business

**9137 FOUNTAINBLEU BLVD.
SUITE 8
MIAMI FL 33172-4304**

Mailing Address

**9137 FOUNTAINBLEU BLVD.
SUITE 8
MIAMI FL 33172-4304**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/10/1991

3a. Date of Last Report

09/27/1994

4. FEI Number

65-0301243

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**VERGES, CECILIA B
9137 FOUNTAINBLEU BLVD.
SUITE 8
MIAMI FL**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Cecilia B Verges

(NOTE: Registered Agent signature required when renewing)

DATE

X 2-8-95

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**VD
VERGES, CECILIA BASSO
9137 FOUNTAINBLEU BLVD.
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
VERGES, HENRY K.
9137 FOUNTAINBLEU BLVD.
MIAMI FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and that the information indicated on this annual report or supplemental annual report, that I am an officer or director of the corporation or the receiver or trustee appointed in Block 12 or Block 13 if changed, or on an attachment with an address.

I do not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

Cecilia B Verges

(PRINT NAME AND TYPE OR PRINTED NAME OF SIGNING OFFICER ON BLOCK 12)

X 2-8-95

(DATE)

(SIGNATURE OF REGISTERED AGENT)