

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# S94449

**FILED**  
**Jun 17, 2008**  
**Secretary of State**

**Entity Name:** C. & Z. ENTERPRISES GROUP, INC.

**Current Principal Place of Business:**

7226 N.W. 56TH STREET  
MIAMI, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

7226 N.W. 56TH STREET  
MIAMI, FL 33166

**New Mailing Address:**

**FEI Number:** 65-0295146

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OLIVARES, ROSALBA  
9042 NW 171 LANE  
MIAMI, FL 33018 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: OLIVARES, ROSALBA,  
Address: 9042 NW 171 LANE  
City-St-Zip: MIAMI, FL 33018

Title: VPS ( ) Delete  
Name: GARCIA, NOHORA  
Address: 15831 NW 11THE STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ZAMBRANO, MARTHA  
Address: 7226 N.W. 56TH STREET  
City-St-Zip: MIAMI, FL 33166

Title: VP (X) Change ( ) Addition  
Name: GARCIA, NOHORA  
Address: 15831 NW 11THE STREET  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: S ( ) Change (X) Addition  
Name: OLIVARES, ROSALBA  
Address: 7226 N.W. 56TH STREET  
City-St-Zip: MIAMI, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARTHA ZAMBRANO

P

06/17/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date