

2016 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A95000001174

Entity Name: C C 1 LIMITED PARTNERSHIP

Current Principal Place of Business:

220 ALHAMBRA CIRCLE
SUITE 304
CORAL GABLES, FL 33134

Current Mailing Address:

220 ALHAMBRA CIRCLE
SUITE 304
CORAL GABLES, FL 33134

FEI Number: 65-0602510

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MURAI, WALD, BIONDO MOREINO, PA
2121 PONCE DE LEON BLVD
#600
CORAL GABLES, FL 33134 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

General Partner Detail :

Document # P95000060098
Name C C 1, INC.
Address 220 ALHAMBRA CIRCLE, SUITE 304
City-State-Zip: CORAL GABLES, FL FL 33134

I hereby 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 a general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CARLOS M. DE LA CRUZ, SR.

MGRM

01/27/2016

Electronic Signature of Signing General Partner Detail

Date