2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007
Secretary of State

DOCUMENT# 814404

Entity Name: DMJM+HARRIS, INC.

Current Principal Place of Business:

515 SOUTH FLOWER ST.
4TH FLOOR
LOS ANGELES, CA 90071

New Principal Place of Business:

Current Mailing Address:

515 SOUTH FLOWER STREET
4TH FLOOR
LOS ANGELES, CA 90071

New Mailing Address:

FEI Number: 13-5511947 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	CHMIELINSKI, JANE A	
Address:	605 THIRD AVENUE	
City-St-Zip:	NEW YORK, NY 10158	
Title:	SVP	( ) Delete
Name:	MCKINNON, LUKE D	
Address:	601 THIRD AVENUE	
City-St-Zip:	NEW YORK, NY 10158	
Title:	VPT	( ) Delete
Name:	SCHWARTZ, PAUL E	
Address:	601 THIRD AVENUE	
City-St-Zip:	NEW YORK, NY 10158	
Title:	SGC	( ) Delete
Name:	GREENSPAN, ELISE,	
Address:	605 THIRD AVENUE	
City-St-Zip:	NEW YORK, NY 10158	
Title:	AS	( ) Delete
Name:	SHIMODA, WESLEY T	
Address:	515 SOUTH FLOWER STREET	
City-St-Zip:	LOS ANGLES, CA 90071	
Title:	VP	( ) Delete
Name:	NORONA, G.M.	
Address:	800 DOUGLAS RD., SUITE 770	
City-St-Zip:	CORAL GABLES, FL 33134	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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: WESLEY SHIMODA AS 01/29/2007

Electronic Signature of Signing Officer or Director — Date