

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001848

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** CMB VISIONS UNLIMITED, INC.

**Current Principal Place of Business:**

10383 S.W 186TH STREET  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

10383 S.W 186TH STREET  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 65-1090966

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BURGESS, CHANDRA M  
10383 SW 186TH STREET  
MIAMI, FL 33157 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: CEO  
Name: BURGESS, CHANDRA M  
Address: 11263 SW 243RD TERRACE  
City-St-Zip: MIAMI, FL 33176

Title: P  
Name: COAKLEY, LUKECIA  
Address: 10383 S.W. 186TH STREET  
City-St-Zip: MIAMI, FL 33157

Title: T  
Name: SMITH, TELCYN  
Address: 19055 N.W. 62ND AVE.  
City-St-Zip: MIAMI, FL 33015

Title: S  
Name: VILNET, JULIA  
Address: 580 N.W. 126TH STREET  
City-St-Zip: MIAMI, FL 33168

Title: VP  
Name: MONTALVO, PIERRE  
Address: 10383 SW 186TH STREET  
City-St-Zip: MIAMI,, FL 33157

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHANDRA MCCLAIN BURGESS

CEO

01/05/2012

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

\_\_\_\_\_  
Date