


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90219 028 \*\*\*150.00

**DOCUMENT # P01000049218**

1. Entity Name  
**C. M. PALOMAR, INC**



60093073

Principal Place of Business      Mailing Address  
**2351 BAYBERRY DRIVE**      **2351 BAYBERRY DRIVE**  
**PEMBROKE PINES, FL 33024**      **PEMBROKE PINES, FL 33024**



2. Principal Place of Business      3. Mailing Address  
**7743 SW 86 st**      **7743 S.W 86 st**

Suite, Apt. #, etc.  
**Apt D-336**      **Apt. D-336**

City & State  
**MIAMI FL**      **MIAMI FL**

Zip      Country      Zip      Country  
**33143**      **FL**      **33143**      **FL**

03302005      Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
**03-0374528**       Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required  
     

**6. Name and Address of Current Registered Agent**      **7. Name and Address of New Registered Agent**

**ALVAREZ, CARLOS**  
**2351 BAYBERRY DRIVE**  
**PEMBROKE PINES, FL 33024**

Name **WENDY L. ORJUELA**  
 Street Address (P.O. Box Number is Not Acceptable) **7743 S.W 86 st**  
**Apt. D-336**  
 City **MIAMI**      FL      Zip Code **33143**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Wendy L Orjuela**      DATE **03-30/2005**  
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**      9. Election Campaign Financing      \$5.00 May Be  
**After May 1, 2005 Fee will be \$550.00**      Trust Fund Contribution.      Added to Fees

**10. OFFICERS AND DIRECTORS**      **11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE **P**       Delete  
 NAME **ALVAREZ, CARLOS**  
 STREET ADDRESS **2351 BAYBERRY DRIVE**  
 CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE **P**       Change       Addition  
 NAME **Wendy L. ORJUELA**  
 STREET ADDRESS **7743 S.W 86 st**  
 CITY-ST-ZIP **Apto. D-336, MIAMI-FL-33143**

TITLE **PT**       Delete  
 NAME **POTOCAR, MARIA M**  
 STREET ADDRESS **2351 BAYBERRY DRIVE**  
 CITY-ST-ZIP **PEMBROKE PINES, FL 33024**

TITLE       Change       Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE       Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE       Change       Addition  
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TITLE       Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE       Change       Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Wendy L Orjuela**      DATE **03/31/05 (954) 7626816**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #