2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108239

Title:

Name:

Address: City-St-Zip:

Entity Name: C & M PROPERTY INVESTMENT CORP.

() Delete

2853 EXECUTIVE PARK DR SUITE 105

ANDRADE, MONICA E

WESTON, FL 33331 US

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2853 EXECUTIVE PARK DR SUITE 105 WESTON, FL 33331 **New Mailing Address: Current Mailing Address:** 2853 EXECUTIVE PARK DR SUITE 105 WESTON, FL 33331 US FEI Number: 20-4498823 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SILVA, ORLANDO 2853 EXECUTIVE PARK DR SUITE 105 WESTON, FL 33331 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ANDRADE, MONICA E Name: Name: 2853 EXECUTIVE PARK DR SUITE 105 Address: Address: City-St-Zip: WESTON, FL 33331 US City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: MOLINA, CESAR H Name: 2853 EXECUTIVE PARK DR SUITE 105 Address: Address: WESTON, FL 33331 US City-St-Zip: City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CESAR MOLINA VP 04/29/2009

() Change () Addition