

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000030763

FILED
Mar 26, 2009
Secretary of State

Entity Name: CMB ENGINEERING SERVICE, INC.

Current Principal Place of Business:

14850 SW 26 STREET
SUITES 212 & 214
MIAMI, FL 33185

New Principal Place of Business:

Current Mailing Address:

14850 SW 26 STREET
SUITES 212 & 214
MIAMI, FL 33185

New Mailing Address:

FEI Number: 20-8589728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRENECHEA, PEDRO
12221 SW 144 TERRACE
MIAMI, FL 33168 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: BARRENECHEA, PEDRO
Address: 12221 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33168

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARRENECHEA, PEDRO
Address: 12221 SW 144 TERRACE
City-St-Zip: MIAMI, FL 33168

Title: VPD () Change (X) Addition
Name: RANGEL, ORLANDO
Address: 9940 SW 37 STREET
City-St-Zip: MIAMI, FL 33165

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.

SIGNATURE: PEDRO BARRENECHEA

PD

03/26/2009

Electronic Signature of Signing Officer or Director

_____ Date