

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000051059

FILED
Apr 24, 2009
Secretary of State

Entity Name: CEO MANAGEMENT SOLUTIONS, CORP.

Current Principal Place of Business:

3419 WASHINGTON LANE
COOPER CITY, FL 33026

New Principal Place of Business:

6381 VIA ROSA
BOCA RATON, FL 33433

Current Mailing Address:

3419 WASHINGTON LANE
COOPER CITY, FL 33026

New Mailing Address:

6381 VIA ROSA
BOCA RATON, FL 33433

FEI Number: 20-8939636

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAKIM, DAVID A
3419 WASHINGTON LANE
COOPER CITY, FL 33026 US

Name and Address of New Registered Agent:

HAKIM, SELWYN A
6381 VIA ROSA
BOCA RATON, FL 33433 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: SELWYN HAKIM

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAVID A.HAKIM CEO/PRESIDENT/DIRECTOR
Address: 3419 WASHINGTON LANE
City-St-Zip: COOPER CITY, FL 33026

Title: CHMN () Delete
Name: SELWYN S. HAKIM CHRBD, SECY, TRES, DIR
Address: 6381 VIA ROSA
City-St-Zip: BOCA RATON, FL 33433

Title: VP () Delete
Name: ALICE I. HAKIM VICE PRESIDENT
Address: 6381 VIA ROSA
City-St-Zip: BOCA RATON, FL 33433

Title: VP () Delete
Name: LESLEY J. HAKIM
Address: 3419 WASHINGTON LANE
City-St-Zip: COOPER CITY, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DAVID A.HAKIM CEO/PRESIDENT/DIRECTOR
Address: 6381 VIA ROSA
City-St-Zip: BOCA RATON, FL 33433

Title: CBST (X) Change () Addition
Name: SELWYN S. HAKIM CHRBD, SECY, TRES, DIR
Address: 6381 VIA ROSA
City-St-Zip: BOCA RATON, FL 33433

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

Title: VP (X) Change () Addition
Name: LESLEY J. HAKIM
Address: 6381 VIA ROSA
City-St-Zip: BOCA RATON, FL 33433

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: SELWYN HAKIM

CBST

04/24/2009

Electronic Signature of Signing Officer or Director

Date