2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#814404

Entity Name: DMJM+HARRIS, INC.

FILED Jan 21, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
515 SOUTH FLOWER ST. 4TH FLOOR LOS ANGELES, CA 90071					
Current Mailing Address:			New Mailing Address:		
515 SOUTH FLOWER STREET 4TH FLOOR LOS ANGELES, CA 90071			515 SOUTH FLOWER ST. 4TH FLOOR LOS ANGELES, CA 90071		
FEI Number:	13-5511947	FEI Number Applied For ()	FEI Num	nber Not Applicable ()	Certificate of Status Desired (X)
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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	t		Date
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECT					
Title: Name: Address: City-St-Zip:	P () C CHMIELINSKI, JA 605 THIRD AVEN NEW YORK, NY	IUE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SVP () E MCKINNON, LUK 605 THIRD AVEN NEW YORK, NY	IUE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	EVP () D PULICARE, JOSE 605 THIRD AVEN NEW YORK, NY	IUE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SGC () E GREENSPAN, EL 605 THIRD AVEN NEW YORK, NY	.ISE, IUE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	AS () E SHIMODA, WESL 515 SOUTH FLOY LOS ANGLES, CA	WER STREET		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SVP ()E ANIDO, GUILLER 800 DOUGLAS R CORAL GABLES	D., SUITE 770		Title: Name: Address: City-St-Zip:	() Change () Addition

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: WESLEY SHIMODA AS 01/21/2008