

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000032047

Entity Name: CM FLORIDA HOLDINGS, INC.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

2525 PONCE DE LEON BLVD.  
SUITE 1225  
CORAL GABLES, FL 33134 US

## Current Mailing Address:

2525 PONCE DE LEON BLVD.  
SUITE 1225  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

25 W FLAGLER STREET  
6TH FLOOR  
MIAMI, FL 33130 US

## New Mailing Address:

25 W FLAGLER STREET  
6TH FLOOR  
MIAMI, FL 33130 US

FEI Number: 98-0595576

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INTERAMERICAN CORPORATE SERVICES LLC  
2525 PONCE DE LEON BLVD.  
SUITE 1225  
CORAL GABLES, FL 33134 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DGM ( ) Change (X) Addition  
Name: SANCHEZ-LOZANO TURMO, RAFAEL  
Address: ORENSE 81 4 PLANTA  
City-St-Zip: MADRID SPAIN, SP 28020 EU

Title: DGM ( ) Change (X) Addition  
Name: FERRAZ RICARTE, RAMON  
Address: 25 W FLAGLER STREET 6TH FLOOR  
City-St-Zip: MIAMI, FL 33130 US

Title: DGM ( ) Change (X) Addition  
Name: GABARDA, LUIS  
Address: ORENSE 81 4 PLANTA  
City-St-Zip: MADRID SPAIN, SP 28020 EU

Title: S ( ) Change (X) Addition  
Name: DE NAVASQUES COBIAN, IGNACIO  
Address: ORENSE 81 4 PLANTA  
City-St-Zip: MADRID SPAIN, SP 28020 EU

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: LUIS GABARDA

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date