

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000003950

Entity Name: C & M SERVICES INTL., INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1451 NORTH MARKET STREET  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

1451 NORTH MARKET STREET  
JACKSONVILLE, FL 32206

**New Mailing Address:**

FEI Number: 22-2953816

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BAHR, CARIDAD  
1451 NORTH MARKET STREET  
JACKSONVILLE, FL 32206 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BAHR, CARIDAD  
Address: 1451 NORTH MARKET STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: SD  
Name: BAHR, MANFRED  
Address: 1451 NORTH MARKET STREET  
City-St-Zip: JACKSONVILLE, FL 32206

I hereby 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 all other like empowered.

SIGNATURE: CARIDAD R. BAHR

PRES

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date