

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006685

FILED
Aug 16, 2009
Secretary of State

Entity Name: C.M.D.N.O. INC.

Current Principal Place of Business:

1361 NW 54 TERR.
HOUSE
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

1361 NW 54 TERR.
HOUSE
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

JEAN-LOUIS, ISAIE
1361 NW 54 TERR.
HOUSE
LAUDERHILL, FL 33313 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

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JEAN-LOUIS, ISAIE
Address: 1361 NW 54 TERR.
City-St-Zip: LAUDERHILL, FL 33313

Title: S () Delete
Name: JEAN-LOUIS, NISHA
Address: 1361 NW 54 TERR.
City-St-Zip: LAUDERHILL, FL 33313

Title: AT () Delete
Name: JEAN-CHARLES, GERBSON
Address: 4550 NW 41ST PLACE
City-St-Zip: LAUDERDALE, FL 33319

Title: T () Delete
Name: SAINTIL, SELANES
Address: 3720 LAKE WORTH RD.
City-St-Zip: PALM BEACH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISAIE JEAN-LOUIS

MR.

08/16/2009

Electronic Signature of Signing Officer or Director

Date