

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000095019

FILED
Apr 30, 2003
Secretary of State

Entity Name: CGM CORP.

Current Principal Place of Business:

6409 CABALLERO BLVD
CORAL GABLES, FL 33146

New Principal Place of Business:

1120 SOUTH ALHAMBRA
CORAL GABLES, FL 33146

Current Mailing Address:

6409 CABALLERO BLVD
CORAL GABLES, FL 33146

New Mailing Address:

1120 SOUTH ALHAMBRA
CORAL GABLES, FL 33146

FEI Number: 65-1146231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENDIA, CARLOS G
6409 CABALLERO BLVD
CORAL GABLES, FL 33146

Name and Address of New Registered Agent:

MENDIA, CARLOS G
1120 SOUTH ALHAMBRA
CORAL GABLES, FL 33146

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: CARLOS G. MENDIA

04/30/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MENDIA, CARLOS G MR
Address: 6409 CABALLERO BLVD
City-St-Zip: CORAL GABLES, FL 33146

Title: VP () Delete
Name: ONEDIA, MENDIA A MS
Address: 6409 CABALLERO BLVD
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MENDIA, CARLOS G MR
Address: 1120 SOUTH ALHAMBRA
City-St-Zip: CORAL GABLES, FL 33146

Title: VP (X) Change () Addition
Name: ONEDIA, MENDIA A MS
Address: 1120 SOUTH ALHAMBRA
City-St-Zip: CORAL GABLES, FL 33146

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLOS G. MENDIA

P

04/30/2003

Electronic Signature of Signing Officer or Director

Date