

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046178

Entity Name: CBM PARKING, INC.

FILED
May 01, 2005
Secretary of State

Current Principal Place of Business:

PO BOX 260186
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

PO BOX 260186
MIAMI, FL 33126

New Mailing Address:

FEI Number: 43-1958789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LEON, EVAELIS F
2601 NW LE JUENE RD.
MIAMI, FL 33142 US

Name and Address of New Registered Agent:

DE LEON, EVAELIS F
PO BOX 260186
MIAMI, FL 33126 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:

05/01/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DE LEON, EVAELIS F
Address: 2301 SW 139 PLACE
City-St-Zip: MIAMI, FL 33175

Title: P () Delete
Name: DE LEON, CHRISTOPHER
Address: 2601 NW LE JUENE RD.
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DE LEON, EVAELIS F
Address: PO BOX 260186
City-St-Zip: MIAMI, FL 33126

Title: P (X) Change () Addition
Name: DE LEON, CHRISTOPHER
Address: PO BOX 260186
City-St-Zip: MIAMI, FL 33126

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: EVAELIS F DE LEON

D

05/01/2005

Electronic Signature of Signing Officer or Director

Date