

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000059899

FILED
Jul 01, 2004
Secretary of State

Entity Name: COMPLETE BUSINESS ADVISORS, INC.

Current Principal Place of Business:

990 SOUTH CONGRESS AVE., STE #4
DELRAY BEACH, FL 33445 US

New Principal Place of Business:

Current Mailing Address:

990 SOUTH CONGRESS AVE., STE #4
DELRAY BEACH, FL 33445 US

New Mailing Address:

FEI Number: 56-2285355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEAN-FRANCOIS, KERVENS
821 RICH DRIVE
TIVOLI #103
DEERFIELD BEACH, FL 33441 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

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: PIERRE-LOUIS, BERNARD
Address: 3308 SPANISH WELLS DR, STE A
City-St-Zip: DELRAY BCH, FL 33445

Title: D () Delete
Name: FORTUNE, CARMELOT D
Address: 2780 NW 94 AVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD () Delete
Name: JEAN-FRANCOIS, KERVENS
Address: 821 RICH DRIVE TIVOLI #103
City-St-Zip: DEERFIELD BEACH, FL 33441

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:

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: BERNARD PIERRE-LOUIS

D

07/01/2004

Electronic Signature of Signing Officer or Director

Date