

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000111218

FILED
Nov 05, 2007
Secretary of State

Entity Name: COMMERCIAL PROPERTY MANAGEMENT ADVISORS, INC.

Current Principal Place of Business:

1475 WEST CYPRESS CREEK ROAD
SUITE 202
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

1475 WEST CYPRESS CREEK ROAD
SUITE 202
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 61-1431891 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERTZ, CLIFFORD I
ONE NORTH CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 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 () Delete
Name: GOLDSTEIN, JAMES E
Address: 1475 WEST CYPRESS CREEK ROAD, SUITE 202
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VT () Delete
Name: BAND, ROBERT
Address: 1475 WEST CYPRESS CREEK ROAD, SUITE 202
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: VS () Delete
Name: PORRAS, MARA
Address: 1475 WEST CYPRESS CREEK ROAD, SUITE 202
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D () Delete
Name: SCHROEDER, ANDERS U
Address: 1475 WEST CYPRESS CREEK ROAD, SUITE 202
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VS (X) Change () Addition
Name: GOLDSTEIN, DANIEL
Address: 1475 WEST CYPRESS CREEK ROAD, SUITE 202
City-St-Zip: FORT LAUDERDALE, FL 33309

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

SIGNATURE: ROBERT BAND

VT

11/05/2007

Electronic Signature of Signing Officer or Director

_____ Date