2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000085257

Entity Name: CM PROFESSIONAL SERVICES, CORP.

FILED Mar 07, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business:	New Principal Place of Business:
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1607 SW CALIFORNIA BLVD
PORT ST LUCIE, FL 33953 US
1607 SW CALIFORNIA BLVD
PORT ST LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

1607 SW CALIFORNIA BLVD
PORT ST LUCIE, FL 33953 US
1607 SW CALIFORNIA BLVD
PORT ST LUCIE, FL 34953 US

FEI Number: 20-1184210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MIRANDA, CARLOS A

1607 SW CALIFORNIA BLVD
PORT ST LUCIE, FL 33953 US

MIRANDA, CARLOS A
1607 SW CALIFORNIA BLVD
PORT ST LUCIE, FL 34953 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: CARLOS A MIRANDA 03/07/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: MIRANDA, CARLOS A Name: MIRANDA, CARLOS A

Address: 1607 SW CALIFORNIA BLVD Address: 1607 SW CALIFORNIA BLVD City-St-Zip: PORT ST LUCIE, FL 33953 US City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: VD () Delete Title: VD (X) Change () Addition Name: CORREA, ROSENI N Name: GOMES, JANDERVAL N

Address: 210 LAKE POINT DRIVE #104 Address: 713 MADES DR

City-St-Zip: OAKLAND PARK, FL 33309 US City-St-Zip: FORT PIERCE, FL 34947 US

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 JUNIOR, ORENIL

 Address:
 Address:
 206 DELGADO DR

 City-St-Zip:
 City-St-Zip:
 FORT PIERCE, FL 34947 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CARLOS A MIRANDA PD 03/07/2007