

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000119646

1. Entity Name
CAPITAL MARKETS FINANCIAL SERVICES, INC.



Principal Place of Business
**8100 OAK LANE
SUITE 300
MIAMI LAKES, FL 33016**

Mailing Address
**8100 OAK LANE
SUITE 300
MIAMI LAKES, FL 33016**



04302008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1581522	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000939445
05/28/08-80023-010 158.75

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	FARAH, EDWARD
STREET ADDRESS	8100 OAK LANE
CITY-ST-ZIP	MIAMI LAKES, FL 33016

TITLE	TREA
NAME	HALL, RONALD M
STREET ADDRESS	8100 OAK LANE
CITY-ST-ZIP	MIAMI LAKES, FL 33016

TITLE	SEC
NAME	QUESADA, GUSTAVO G
STREET ADDRESS	8100 OAK LANE
CITY-ST-ZIP	MIAMI LAKES, FL 33016

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edward Farah
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 30, 2008
Date

305-512-6081
Daytime Phone