

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000025906

Entity Name: CM ASSOCIATES, INC.

FILED  
Apr 23, 2007  
Secretary of State

## Current Principal Place of Business:

5005 COLLINS AVE., SUITE 814  
MIAMI BCH, FL 33140

## New Principal Place of Business:

20460 NE 34 COURT  
#4  
AVENTURA, FL 33180

## Current Mailing Address:

5005 COLLINS AVE., SUITE 814  
MIAMI BCH, FL 33140

## New Mailing Address:

20460 NE 34 COURT  
#4  
AVENTURA, FL 33180

FEI Number: 86-1134943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHROEDER, GENE  
5005 COLLINS AVE., SUITE 814  
MIAMI BCH, FL 33140 US

## Name and Address of New Registered Agent:

ROSEN, PHILIP C ESQ.  
8551 W. SUNRISE BLVD.  
#208  
FT. LAUDERDALE, FL 33322 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: PHILIP C. ROSEN, ESQ.

04/23/2007

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: MIROPOL, CINDY  
Address: 5005 COLLINS AVE., SUITE 814  
City-St-Zip: MIAMI BCH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MIROPOL, CINDY  
Address: 20460 NE 34 COURT #4  
City-St-Zip: AVENTURA, FL 33180

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: CINDY MIROPOL

PD

04/23/2007

Electronic Signature of Signing Officer or Director

Date