

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000064733

FILED
Apr 23, 2007
Secretary of State

Entity Name: C/CM LEJEUNE, INC.

Current Principal Place of Business:

355 ALHAMBRA CIRCLE STE 900
CORAL GABLES, FL 33134

New Principal Place of Business:

2855 LEJEUNE ROAD
4TH FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

355 ALHAMBRA CIRCLE STE 900
CORAL GABLES, FL 33134

New Mailing Address:

2855 LEJEUNE ROAD
4TH FLOOR
CORAL GABLES, FL 33134

FEI Number: 20-2834963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBB, KOLLEEN O.P.
355 ALHAMBRA CIRCLE STE 900
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

COBB, KOLLEEN O.P.
2855 LEJEUNE ROAD
4TH FLOOR
CORAL GABLES, FL 33134 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: _____

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CODINA, ARMANDO
Address: 355 ALHAMBRA CIRCLE STE 900
City-St-Zip: CORAL GABLES, FL 33134

Title: VS () Delete
Name: COBB, KOLLEEN O.P. ESQ.
Address: 355 ALHAMBRA CIRCLE STE 900
City-St-Zip: CORAL GABLES, FL 33134

Title: VS () Delete
Name: HEVIA, JOSE
Address: 355 ALHAMBRA CIRCLE STE 900
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Delete
Name: SAN MIGUEL, JORGE
Address: 355 ALHAMBRA CIRCLE STE 900
City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CODINA, ARMANDO
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: CD (X) Change () Addition
Name: HENRIQUES, ADOLFO
Address: 10151 DEERWOOD PARK BLVD., BLDG 100, #330
City-St-Zip: JACKSONVILLE, FL 32256

Title: VD (X) Change () Addition
Name: POPKY, DANIEL H
Address: 10151 DEERWOOD PARK BLVD., BLDG 100, #330
City-St-Zip: JACKSONVILLE, FL 32256

Title: VP (X) Change () Addition
Name: HEVIA, JOSE
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VPAS () Change (X) Addition
Name: COBB, KOLLEEN
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: T () Change (X) Addition
Name: LEHAN, BRADLEY D
Address: 10151 DEERWOOD PARK BLVD., BLDG 100, #330
City-St-Zip: JACKSONVILLE, FL 32256

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: HEIDI J. EDDINS

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04/23/2007

Electronic Signature of Signing Officer or Director

Date