

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163757

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: CHARLES MATH, INC.

**Current Principal Place of Business:**

731 DATE PALM DRIVE  
LAKE PARK, FL 33403

**New Principal Place of Business:**

**Current Mailing Address:**

731 DATE PALM DRIVE  
LAKE PARK, FL 33403

**New Mailing Address:**

FEI Number: 20-4179489      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

METAYER, CHARLEMAGNE  
731 DATE PALM DRIVE  
LAKE PARK, FL 33403      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: METAYER, CHARLEMAGNE  
Address: 731 DATE PALM DRIVE  
City-St-Zip: LAKE PARK, FL 33403

Title: D ( ) Delete  
Name: JEANBAPTISTE, NAHOUM  
Address: 5923 BIMINI CIRCLE EAST  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete  
Name: OSTERVAL, QUETEL  
Address: 3581 SOUTH OCEAN BLVD. #8D  
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete  
Name: JEANBAPTISTE, FARAH  
Address: 5923 BIMINI CIRCLE EAST  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete  
Name: FELICIANO, JULIE  
Address: 167 WATERSIDE DRIVE  
City-St-Zip: HYPOLUXO, FL 33462

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: CHARLEMAGNE METAYER

Electronic Signature of Signing Officer or Director

PRES

04/29/2008

\_\_\_\_\_ Date