

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000000040

FILED
Jan 11, 2008
Secretary of State

Entity Name: CDM PROPERTY MANAGEMENT INC

Current Principal Place of Business:

4581 WESTON ROAD
134
WESTON, FL 33322 US

New Principal Place of Business:

Current Mailing Address:

4581 WESTON ROAD
134
WESTON, FL 33322 US

New Mailing Address:

FEI Number: 26-1029281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVATORE, DANIEL
4581 WESTON ROAD
134
WESTON, FL 33322 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: SALVATORE, DANIEL MR
Address: 4581 WESTON ROAD SUITE 134
City-St-Zip: WESTON, FL 33322 US

Title: VP () Delete
Name: DAVID, MICHAEL MR.
Address: 4581 WESTON ROAD SUITE 134
City-St-Zip: WESTON, FL 33322

Title: S () Delete
Name: PEREZ, VIVIAN MRS.
Address: 4581 WESTON ROAD SUITE 134
City-St-Zip: WESTON, FL 33322

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

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: AVP () Change (X) Addition
Name: RAMATHIBELA, CHRISTINE
Address: 1600 NE 126TH STREET UNIT 312
City-St-Zip: MIAMI, FL 33181

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: DANIEL SALVATORE

PRES

01/11/2008

Electronic Signature of Signing Officer or Director

_____ Date