

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109740

FILED
Aug 24, 2008
Secretary of State

Entity Name: CBA REALTY & MANAGEMENT CORP.

Current Principal Place of Business:

16375 N.E. 18TH AVENUE
311
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

16375 NE 18 AVE STE 311
N MIAMI BEACH, FL 33162

New Principal Place of Business:

16375 N.E. 18TH AVENUE
325
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

16375 N.E. 18TH AVENUE
325
NORTH MIAMI BEACH, FL 33162

FEI Number: 20-5411215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRA R. SHAPIRO, P.A.
16375 N.E. 18TH AVENUE
225
NORTH MIAMI BEACH, FL 33162 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

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: P () Delete
Name: MOINELO, CRISTINA D
Address: 16375 N.E. 18TH AVENUE, SUITE 311
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VP () Delete
Name: MOINELO, CRISTINA D
Address: 16375 N.E. 18TH AVENUE, SUITE 311
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOINELO, CRISTINA D
Address: 16375 N.E. 18TH AVENUE, SUITE 325
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: CRISTINA D. MOINELO

P/V/P

08/24/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date