

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000017650

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: CARMEN MORRIS ACCOUNTING SERVICES, INC.

**Current Principal Place of Business:**

693 NE 82ND TERRACE  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

693 NE 82ND TERRACE  
MIAMI, FL 33138

**New Mailing Address:**

FEI Number: 36-4599263      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEWIS, ANDRE  
693 NE 82ND TERRACE  
MIAMI, FL 33138      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: D      ( ) Delete  
Name: COLEMAN, LIONITA  
Address: 9239 SOUTHAMPTON PL  
City-St-Zip: BOCA RATON, FL 33434

Title: D      ( ) Delete  
Name: KAHILL, SOMYA  
Address: 693 N E 82ND TERRACE  
City-St-Zip: MIAMI, FL 33138

Title: D      ( ) Delete  
Name: JEFFERSON, CYNTHIA  
Address: 1860 N W 59TH ST  
City-St-Zip: MIAMI, FL 33142

Title: P      ( ) Delete  
Name: MORRIS, CARMEN  
Address: 693 NE 82ND TERRACE  
City-St-Zip: MIAMI, FL 33138

**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:

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: CARMEN MORRIS

Electronic Signature of Signing Officer or Director

PRES

04/27/2009

\_\_\_\_\_ Date