

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000122973

Entity Name: CMJ COMMUNICATIONS, INC.

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

4701 VILLABELA DRIVE  
SEBRING, FL 33872 US

## New Principal Place of Business:

4815 CALATRAVA AVE  
SEBRING, FL 33872 US

## Current Mailing Address:

4701 VILLABELA DRIVE  
SEBRING, FL 33872 US

## New Mailing Address:

4815 CALATRAVA AVE  
SEBRING, FL 33872 US

FEI Number: 26-1406058

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIMS, LAURA K CPA  
203 SE 2ND AVENUE  
OKEECHOBEE, FL 34974 US

## Name and Address of New Registered Agent:

SAMUEL, FERNANDEZ  
4815 CALATRAVA AVE  
SEBRING, FL 33872 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: SAMUEL FERNANDEZ

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FERNANDEZ, SAMUEL  
Address: 4701 VILLABELA DRIVE  
City-St-Zip: SEBRING, FL 33872 US

Title: VP ( ) Delete  
Name: GONZALEZ, RAMON  
Address: 4112 RAMERO STREET  
City-St-Zip: SEBRING, FL 33872 US

Title: VP (X) Delete  
Name: MARRERO, RAUL E  
Address: 4515 STARFISH AVENUE  
City-St-Zip: SEBRING, FL 33870 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FERNANDEZ, SAMUEL  
Address: 4815 CALATRAVA  
City-St-Zip: SEBRING, FL 33872 US

Title: VP (X) Change ( ) Addition  
Name: MONTALVO, ROSA D  
Address: 4815 CALATRAVA AVE  
City-St-Zip: SEBRING, FL 33872

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: SAMUEL FERNANDEZ

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date