

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000072207

Entity Name: CMF CONSULT INC.

FILED
Jan 03, 2012
Secretary of State

Current Principal Place of Business:

619 TROPICAL BREEZE WAY
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

619 TROPICAL BREEZE WAY
TAMPA, FL 33602 US

New Mailing Address:

FEI Number: 45-2987279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAVALORO, CHRISTOPHER
619 TROPICAL BREEZE WAY
TAMPA, FL 33602 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

OFFICERS AND DIRECTORS:

Title: P, T
Name: FAVALORO, CHRISTOPHER
Address: 619 TROPICAL BREEZE WAY
City-St-Zip: TAMPA, FL 33602 US

Title: S, D
Name: FAVALORO, CHRISTOPHER
Address: 619 TROPICAL BREEZE WAY
City-St-Zip: TAMPA, FL 33602 US

I hereby 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 all other like empowered.

SIGNATURE: CHRISTOPHER FAVALORO

P, T

01/03/2012

Electronic Signature of Signing Officer or Director

Date