Applied For

\$8.75 Additional

Fee Required

Not Applicable



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	P93000062867
1. Corporation Name.	1.0	

CMG PROPERTY MANAGEMENT, INC.

Principal Place of Business 3661 S. MIÁMI AVE. SUITE 709 MIAMI FL: 33133

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

Mailing Address

3661 S. MIAMI AVE. **SUITE 709** 

2a. Mailing Address

Cltv & State

Suite, Apt. #, etc.

26

27

MIAMI FL 33133

## **FILED** Feb 09, 1999 8:00 am Secretary of State

02-09-1999 90008 006 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

Certifcate of Status Desired

09/09/1993

65-0435141

4. FEI Number

23	28					Trust Fund Contribution	Added to	,		
Zip	Country	Zip	Country		8.	This corporation owes the current year	Intangible			
24	25	29	30			Personal Property Tax.	l. Yes	□No		
Name and Address of Current Registered Agent					10.	Name and Address of New Registere	d Agent			
	DOEDO OUEDA 11		81	Name	1					
GUERRERO, CHERYL M 3661 S. MIAMI AVE. SUITE 709 MIAMI FL 33133			82	Street Addre	1 299 (P	(P.O. Box Number is Not Acceptable)				
				0.1001710010	55 (F.O. BOX NUMBER IS NOT ACCEPTABLE)					
			83	83		[] · · · · · · · · · · · · · · · · · · ·				
			94	84 City		85 Zip Code				
			04	City		· F	85 Zip C	ode		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered										
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIGNATURE			,					,		
	Signature, typed or printed name of registered	d agent and title if applicable.	(NOTE: Registered Agent	signature required	when re	einstating) (, 'A' DATE				
12.	OFFICERS	S AND DIRECTORS	13.		Α	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12		
TITLE	D : : : : : : : : : : : : : : : : : : :	☐ DELE	TE 1.1 TITLE		Ì		Change	Addition		
NAME	GUERRERO, CHERYL M		1.2 NAME		,					
STREET ADDRESS	NODRESS 3734 MAIN HWY 1.38			ADDRESS	;					
CITY-ST-ZIP	COCONUT GROVE FL 3313	33	1.4 CITY-ST	-ZIP	- 1					
TITLE '	į.	DELE	TE 2.1 TITLE				☐ Change	☐ Addition		
NAME			2.2 NAME		i			ľ		
STREET ADDRESS			2.3 STREET	ADDRESS		i				
CITY-ST-ZIP	•		2.4.CITY-ST	-ZIP	3					
TITLE	and contains to the contains of the contains o	☐ DEFE	TE 3.1 TITLE				~≕⊡ Change —	- Addition =		
NAME	r .		3.2 NAME		ļ			ļ		
STREET ADDRESS			3.3 STREET	ADDRESS	1		the tree said	4		
CITY-ST-ZIP	•		3.4. CITY-ST	-ZiP	;			g. 34. 👫		
TITLE	1 a	☐ DELE	TE 4.1 TITLE		ļ	17 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Change	Addition		
NAME			4. 2 NAME			!				
STREET ADDRESS			4.3 STREET	ADDRESS	1					
CITY-ST-ZIP	1		4.4 CITY-ST-	-ZIP						
TITLE		☐ DELE	TE 5.1 TITLE		ĺ		☐ Change	☐ Addition		
NAME			5.2 NAME					Ì		
STREET ADDRESS			5.3 STREET	ADDRESS	- !		•			
CITY-ST-ZIP			5.4 CITY-ST-	ZIP	ĺ		•			
TITLE	-	, DEFE	TE 6.1 TITLE		i		Change	Addition		
NAME	, , , , , , , , , , , , , , , , , , ,		6.2 NAME		i		•			
STREET ADDRESS	\$ *** *** *** *** *** *** *** *** *** *	•	6.3 STREET	ADDRESS	:			· ·		
CITY-ST-ZIP			6.4 CITY-ST-		'n					
44 I barabu a		1 10 11 11			- 1					

for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informati surate and that my signature shall have the same legal effect as if made under oath; that I am an execute his peport as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental annual officer or director of the corporation or the receiver Block 12 or Block 13 if changed, or on an attachment

01/15/99

(305)856-9518