

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000004845

FILED
Aug 26, 2009
Secretary of State

Entity Name: CORPORATE EXECUTIVE SUITES, INC.

Current Principal Place of Business:

1900 CORPORATE BLVD., NW
SUITE 400-E
BOCA RATON, FL 33431

New Principal Place of Business:

20283 STATE ROAD 7
SUITE 400
BOCA RATON, FL 33498

Current Mailing Address:

20283 STATE ROAD 7, SUITE 213
BOCA RATON, FL 33498

New Mailing Address:

FEI Number: 65-0762303 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOOM, JONATHAN
2295 NW CORPORATE BLVD.
SUITE 117
BOCA RATON, FL 33431 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: SD () Delete
Name: GALEL, YORAM A
Address: 20283 STATE ROAD 7, SUITE 213
City-St-Zip: BOCA RATON, FL 33498

Title: PD () Delete
Name: GALEL, HENRI
Address: 20283 STATE ROAD 7, SUITE 213
City-St-Zip: BOCA RATON, FL 33498

Title: TD () Delete
Name: ZIMET, DAVE R
Address: 20283 STATE ROAD 7, SUITE 213
City-St-Zip: BOCA RATON, FL 33498

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:

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: DAVE ZIMET

Electronic Signature of Signing Officer or Director

COO

08/26/2009

Date