

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000008955

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** C & M ENTERPRISES OF PALM BEACH COUNTY, INC.

**Current Principal Place of Business:**

13304 INDIAN MOUND ROAD  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

13304 INDIAN MOUND ROAD  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 65-0824377

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARELLANO, CARLOS R  
13304 INDIAN MOUND ROAD  
WELLINGTON, FL 33414 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: PSTD  
Name: ARELLANO, CARLOS R  
Address: 13304 INDIAN MOUND RD  
City-St-Zip: WELLINGTON, FL 33414

Title: V  
Name: ARELLANO, CLARA M  
Address: 13304 INDIAN MOUND RD  
City-St-Zip: WELLINGTON, FL 33414

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: CARLOS R. ARELLANO

PSTD

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date