

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000080879

1. Entity Name
CM HOLDINGS, INC.

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90102 006 ***150.00

Principal Place of Business

Mailing Address

3149 J.P. CURCI DR.
BLDG 1A, STE 1
PEMBROKE PARK FL 33009

3149 J.P. CURCI DR.
BLDG 1A, STE 1
PEMBROKE PARK FL 33009

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0863767

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCALPIN, RICHARD J
80 SW 8TH STREET, SUITE 2805
MIAMI FL 33130

Name Kevin Martini, President
Street Address (P.O. Box Number is Not Acceptable) 3149 J.P. Curci Dr., #1A-1
City Pembroke Park FL 33009

8. 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

Signature, typed or printed name of registered agent and title if applicable.

President

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TS ☐ Delete
NAME MARTINI, NINO
STREET ADDRESS 1311 JEFFERSON STREET
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ Delete
NAME CHAPMAN, JAMES
STREET ADDRESS 4400 GULF SHORE BLVD., #203
CITY-ST-ZIP NAPLES FL 34103

TITLE D ☒ Change ☐ Addition
NAME Chapman, James
STREET ADDRESS 101 Sextant Court
CITY-ST-ZIP Newbern NC 28562

TITLE P ☐ Delete
NAME MARTINI, KEVIN
STREET ADDRESS 3149 N.P. CURCI DRIVE A1A
CITY-ST-ZIP PEMBROKE PINES FL 33009

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ Delete
NAME CHAMPINE, HUBERT
STREET ADDRESS 392 RIDGEWOOD DR.
CITY-ST-ZIP ROCHESTER MI 48308

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-01 954 894-9811

CR2E034 (10/00)