

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000045626

FILED
Mar 02, 2009
Secretary of State

Entity Name: CIMA MANAGEMENT CORP.

Current Principal Place of Business:

2140 WEST FLAGLER STREET
SUITE 109
MIAMI, FL 331351662

New Principal Place of Business:

Current Mailing Address:

2140 WEST FLAGLER STREET
SUITE 109
MIAMI, FL 331351662

New Mailing Address:

FEI Number: 65-0924345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, EDITH
2140 WEST FLAGLER STREET
SUITE 109
MIAMI, FL 331351662 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ, EDITH T
Address: 297 N. COCONUT LANE
City-St-Zip: MIAMI BEACH, FL 331395161

Title: VSD () Delete
Name: GONZALEZ, ERNESTO JR
Address: 2140 WEST FLAGLER STREET., #109
City-St-Zip: MIAMI, FL 331351662

Title: VTD () Delete
Name: GONZALEZ, RALPH A
Address: 2140 WEST FLAGLER STREET., #109
City-St-Zip: MIAMI, FL 331351662

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: EDITH T. GONZALEZ

PD

03/02/2009

Electronic Signature of Signing Officer or Director

_____ Date