## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S17091

FILED Mar 25, 2009 Secretary of State

Entity Name: C. G. B. M. T. ENTERPRISES, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
145 KNOBE HIGHLAND	BY VIEW DRIV ), MI 48357	/E					
Current Mailing Address:				New Mailing Address:			
145 KNOBBY VIEW DRIVE HIGHLAND, MI 48357							
FEI Number:	65-0221932	FEI Number Applied For ( )	FEI Num	nber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SIMPSON, RICARDO 24602 STILBRIDGE CT LEESBURG, FL 34748 US				SIMPSON, RICHARD 24602 STILBRIDGE CT LEESBURG, FL 34748 US			
The above in the State		submits this statement for the p	ourpose of	f changing it	ts registered of	fice or registered agent, or both,	
SIGNATURE: RICHARD SIMPSON				03/25/2009			
Electronic Signature of Registered Agent				Date			
Election Cam	paign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	٠, ,			Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	. ,			Title: Name: Address: City-St-Zip:	VP (X) GARAVAGLIA, C 148 KNOBBY VI HIGHLAND, MI	EW DRIVE	
Title: Name: Address: City-St-Zip:	V.P. ( ) GARAVAGLIA, ( 4550 18TH AVE POMPANO BEA	NW #2-207		Title: Name: Address: City-St-Zip:	()	Change ( ) Addition	
Title: Name:	V () GARAVAGLIA,	Delete CHARLES J		Title: Name:	( )	Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CHARLES GARAVAGLIA V'P. 03/25/2009

25419 LIBERTY LANE

FARMINGTON, MI 48335

Address:

City-St-Zip: