FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V64961

(8)

C/M DATA, INC.

Principal Files 10717 SW 104 MIAMI FL 3317	TH STREET	Mailing Address 10717 SW 104TH STREET MIAMI FL 33176-8162							
						3. Date Incorporated or Qualified 09/14/1992		te of Last F 22/1996	Peport
2. Phnoipal F 21	hace of Business	2a. Mailing Address 26			4, FEI Number 65-0362533	Applied For Not Applicable			
Suite, Apt #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat	0	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Z(p 24	Country 25	Zip 29	Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	g. Name and Address of Currer CARATO, M.T.	nt Registered Agent		81	Name	10. Name and Address of New Re	glatered	igent	
10717 SW 104TH STREET MIAMI FL 33178				82 83		ress (P.O. Box Number is Not Acceptal	ole)		
office or i	to the provisions of Sections 607.050 registered agent, or both, in the State im lamil ar with, and accept the oblig	of Florida, Such change was	authorized	d by	the corpora	poration submits this statement for the litins board of directors. I hereby acce	FL ourpose of pt the app	changing	its registered s registered
SIGNATURE	Sexualone, typed or proted name of required age	ent and tote if applicable (NC	OTE: Registere:	d Ager	nt signalure requi	red when reinstaling)	DATE		
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
100	DPS	☐ DELETE	111	TLE	J			☐ Change	Addition
NAME	NACCARATO, MARY T.		1.2 N	1.2 NAME					
STREET ADDRESS.	10717 SW 104TH ST.		1.3 \$1	TREET	ADDRESS				
C(1) - S1 - Z(P	MIAMI FL			TY-ST	- ZIP				
TITLE	DVPT	☐ DELETE	2.1 11	TLE	}			L. Change	Addition
NAME	PHILLIPS, CAROLIN M.T.		2.2 N/	ame	j				
STREET ADORESS	10717 SW 104TH STREET		2.3 \$1	REET	ADDRESS				

2 4 CITY-ST-ZIP

3.3 STREET ADDRESS 3.4. CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

Mary T. Naccarato

5.4 CITY - ST - ZIP

3.1 TITLE 3.2 NAME

4.1 TITLE 4. 2 NAME 43 STREET ADDRESS

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

DELETE

DELETE

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6.4 CITY-ST-ZIP CHTY - \$1 - 70P 14. I do nereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MIAMI FL

CHY-\$1 78

CITY STOZIP

STHEET ADDRESS

STEELT ACORESS

STREET ADDRESS

OHY-\$1,20

CITY ST. 769

147,F

NAM: STREET ACCORESS

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FILED

Apr 01 1997 8:00am

Secretary of State

305-347-6915

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