

**2016 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P15000042330

**Entity Name:** CM BUSINESS, INC.

**Current Principal Place of Business:**

3900 PROMENADE SQUARE DR  
APT5512  
ORLANDO, FL 32837

**FILED**  
**Apr 04, 2016**  
**Secretary of State**  
**CC4432082608**

**Current Mailing Address:**

3900 PROMENADE SQUARE DR  
APT 5512  
ORLANDO, FL 32837 US

**FEI Number: 47-4013248**

**Certificate of Status Desired: No**

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

MASTANDREA, ALEXANDRE T  
3900 PROMENADE SQUARE DR.  
5512  
ORLANDO, FL 32837 US

*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

**Officer/Director Detail :**

Title           DPT  
Name           MASTANDREA, ALEXANDRE T  
Address        3900 PROMENADE SQUARE DR. APT.  
                  5512  
City-State-Zip: ORLANDO FL 32837

*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: ALEXANDRE T MASTANDREA**

**DPT**

**04/04/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date