

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

FILED

Jan 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H78657 (4)
1. Corporation Name
CARIBTRAN, INC.

Principal Place of Business
7525 NW 37TH AVE BLDG E
MIAMI FL 33147

Mailing Address
7525 NW 37TH AVE BLDG E
MIAMI FL 33147

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/26/1985

4. FEI Number
59-2586560
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOLA, MANUEL JESUS
7525 NW 37TH AVE BLDG E
MIAMI FL 33147

81 Name

SOLA, MANUEL JESUS

82 Street Address (P.O. Box Number is Not Acceptable)
3550 N.W. 33 STREET

83

84 City

MIAMI,

FL

85

Zip Code
33142

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
SOLA, MANUEL JESUS
STREET ADDRESS
6800 NW 37TH CT.
CITY-ST-ZIP
MIAMI FL

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
SOLA, MANUEL JESUS
1.3 STREET ADDRESS
3550 N.W. 33 STREET
1.4 CITY-ST-ZIP
MIAMI, FL 33142

TITLE ☐ DELETE

NAME
MARTINEZ, LUIS
STREET ADDRESS
6800 NW 37TH CT.
CITY-ST-ZIP
MIAMI FL

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
MARTINEZ, LUIS
2.3 STREET ADDRESS
3550 N.W. 33 STREET
2.4 CITY-ST-ZIP
MIAMI, FL. 33142

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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

1/9/98 (303) 696-1200

CR2E034 (10/97)