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Jun 25 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N94000004899 (0)
1. Corporation Name
CARIBBEAN CANBOULAY OF MIAMI, INC.



Principal Place of Business: 18785 N.W. 62ND AVENUE UNIT 107 MIAMI FL 33015 US
Mailing Address: 18785 NW 62ND AVE UNIT 107 MIAMI FL 33015 US

3. Date Incorporated or Qualified: 09/30/1994
4. FEI Number: 65-0535000
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 18785 NW 62nd Ave., 22 Unit 107, 23 Miami, FL, 24 33015, 25 USA
2a. Mailing Address: 26 18785 NW 62nd Ave, 27 Unit 107, 28 Miami, FL, 29 33015, 30 USA

9. Name and Address of Current Registered Agent: VANCE, SHIRLEY, 18785 N.W. 62ND AVENUE UNIT 107 MIAMI FL 33015

10. Name and Address of New Registered Agent: B1 Name, B2 Street Address (P.O. Box Number is Not Acceptable), B3, B4 City, B5 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: [Signature] DATE: 5/16/98

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	MAHABIR, BOB	
STREET ADDRESS	6073 NW 167TH STREET	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	TYSON, TYLER T	
STREET ADDRESS	574 N.W. 46TH TERRACE	
CITY-ST-ZIP	PLANTATION FL 33317	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	GRUBER, DR STEVE	
STREET ADDRESS	6073 NW 167TH ST	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	WEST, DON	
STREET ADDRESS	1170 NE 110 TERR	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SMITH, MARILYN	
STREET ADDRESS	6073 NW 167TH ST	
CITY-ST-ZIP	MIAMI LAKES FL	
TITLE	PRD	<input type="checkbox"/> DELETE
NAME	RAMCHARAN, LINDA	
STREET ADDRESS	219 NE 141ST STREET	
CITY-ST-ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Tyler T. Tyson	
1.3 STREET ADDRESS	574 NW 46th Ter	
1.4 CITY-ST-ZIP	Plantation, FL 33317	
2.1 TITLE	Secretary/Treasurer (D)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Don West	
2.3 STREET ADDRESS	1170 NE 110 Ter.	
2.4 CITY-ST-ZIP	Miami, FL 33161	
3.1 TITLE	PRO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Linda Ramcharran (D)	
3.3 STREET ADDRESS	219 NE 141st Street	
3.4 CITY-ST-ZIP	Miami, FL 33161	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 6/14/98

CR2E037 (10/97)