

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000068324

FILED  
Mar 07, 2005  
Secretary of State

Entity Name: CARIBBEAN TRANSPORT LINES, INC.

**Current Principal Place of Business:**

12041 SW 78TH TERR.  
MIAMI, FL 33183

**New Principal Place of Business:**

**Current Mailing Address:**

12041 SW 78TH TERR.  
MIAMI, FL 33183

**New Mailing Address:**

FEI Number: 65-1120254

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEDINA, JORGE  
12041 SW 78TH TERR.  
MIAMI, FL 33183 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PDS ( ) Delete  
Name: MEDINA, JORGE  
Address: 12041 SW 78TH TERR.  
City-St-Zip: MIAMI, FL 33183

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Change (X) Addition  
Name: MEDINA, AIDA  
Address: 12041 S.W. 78 TERRACE  
City-St-Zip: MIAMI, FL 33183

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: JORGE MEDINA

PDS

03/07/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date