## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000072294

Address:

City-St-Zip:

2300 CORAL WAY, SUITE 111

MIAMI, FL 33145

FILED Apr 29, 2004 Secretary of State

Entity Name: GREAT CARIBBEAN FAMILY CORP.						
Current Principal Place of Business:			New Principal Place of Business:			
2300 CORA SUITE 200 MIAMI, FL						
Current Mailing Address:			New Mailing Address:			
2300 CORA SUITE 200 MIAMI, FL						
FEI Number:	51-0458868	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
FLORIDA A 2300 CORA SUITE 200 MIAMI, FL	AL WAY	PORT SERVICES, INC.				
The above in the State	named entity of Florida.	submits this statement for the pu	rpose of changing it	s registered	office or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered Ager	nt		Date	
Election Cam	ıpaign Financir	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( MOSCETTI, AI 2300 CORAL V MIAMI, FL 33	WAY STE 111	Title: Name: Address: City-St-Zip:	MOSCETTI, A	. WAY STE 111	
Title: Name: Address: City-St-Zip:	V ( WILLIAMS, JA 2300 CORAL V MIAMI, FL 33	WAY STE 111	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( SERRALTA, G 2300 CORAL V MIAMI, FL 33	WAY STE 111	Title: Name: Address: City-St-Zip:	SERRALTA,	(X) Change()Addition GADAYCES S . WAY STE 111 3145	
Title: Name:		) Delete ERA, CARLOS M	Title: Name:		(X) Change()Addition TERA, CARLOS M	

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.

Address:

City-St-Zip:

2300 CORAL WAY, SUITE 111

MIAMI, FL 33145

SIGNATURE: GADYACES SERRALTA S 04/29/2004