

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094125

FILED
Apr 29, 2009
Secretary of State

Entity Name: VILLAGE OF THE CARIBBEAN CULTURES CORP.

Current Principal Place of Business:

2800 W OAKLAND PARK BLVD
101
OAKLAND PARK, FL 33311

New Principal Place of Business:

Current Mailing Address:

2800 W OAKLAND PARK BLVD.
101
OAKLAND PARK, FL 33311

New Mailing Address:

FEI Number: 20-0837493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDRE, DIXON
2800 W OAKLAND PARK BLVD
101
OAKLAND PARK, FL 33311 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: D () Delete
Name: VOYARD, RANDOLPH F
Address: 3740 INVERRARY DRIVE
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: HENAO, CESAR
Address: 11 RUE DES HETRES
City-St-Zip: 60580 COYE LA FORET, FRANCE,

Title: D () Delete
Name: GUILLAUME, CLAIRE
Address: 3740 INVERRARY DRIVE
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: FELIX, SABINE M
Address: 1 OAKWOOD PLAZA
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SABINE MILLIEN-FELIX

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date