

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000043143

FILED
Apr 22, 2009
Secretary of State

Entity Name: CARIBBEAN CARPENTER, CORP.

Current Principal Place of Business:

8390 NW. 53 ST.
114
DORAL, FL 33166

New Principal Place of Business:

10950 NW 138TH ST.
6
HIALEAH GARDENS, FL 33018

Current Mailing Address:

8390 NW. 53 ST.
114
DORAL, FL 33166

New Mailing Address:

10950 NW 138TH ST.
6
HIALEAH GARDENS, FL 33018

FEI Number: 51-0504450

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, RAUL
330 W. 43 ST.
HIALEAH, FL 33012 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: PRES () Delete
Name: FERNANDEZ, RAUL
Address: 330 W. 43 ST.
City-St-Zip: HIALEAH, FL 33012

Title: VPRES () Delete
Name: FERNANDEZ, ROGELIO
Address: 330 W 43 ST
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RAUL FERNANDEZ

PRES

04/22/2009

Electronic Signature of Signing Officer or Director

_____ Date