

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000085941

Entity Name: CARIBBEAN SALT, CO.

FILED
Sep 13, 2007
Secretary of State

Current Principal Place of Business:

2310 W WATERS AVE, SUITE D
TAMPA, FL 336042757 US

New Principal Place of Business:

Current Mailing Address:

2310 W WATERS AVE, SUITE D
TAMPA, FL 336042757 US

New Mailing Address:

FEI Number: 20-1218655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTAELLA, JUAN
2310 W WATERS AV
SUITE D
TAMPA, FL 336042757 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: JUAN SANTAELLA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TSOUKATOS, MIGUEL
Address: 2100 PINNACLE CIR SOUTH
City-St-Zip: PALM HARBOR, FL 34684 US

Title: VD () Delete
Name: TSOUKATOS, MARISOL G
Address: 2100 PINNACLE CIR SOUTH
City-St-Zip: PALM HARBOR, FL 34684 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TSOUKATOS, MIGUEL
Address: URB LAS VILLAS AV 17 # 328 EL MORRO
City-St-Zip: LECHERIAS/VENEZUELA, AN 6016 V

Title: VD (X) Change () Addition
Name: TSOUKATOS, MARISOL G
Address: URB LAS VILLAS AV 17 # 328 EL MORRO
City-St-Zip: LECHERIAS/VENEZUELA, AN 6016 V

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: MIGUEL TSOUKATOS

PD

09/13/2007

Electronic Signature of Signing Officer or Director

Date