## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000033721

Entity Name: CARIBBEAN FUND CARIFUND MANAGEMENT, LLC

FILED Jan 12, 2009 Secretary of State

US

Current Principal Place of Business: New Principal Place of Business:

220 ALHAMBRA CIRCLE 220 ALHAMBRA CIRCLE

11TH FL CORAL GABLES, FL 33134 11TH FL CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

220 ALHAMBRA CIRCLE 220 ALHAMBRA CIRCLE

11TH FLOOR
CODAL GARLES EL 33134 CODAL GARLES EL 331

CORAL GABLES, FL 33134 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

CTC MANAGEMENT SERVICES LLC
220 ALHAMBRA CIRCLE, 11TH FL
CORAL GABLES, FL 33134 US

CTC MANAGEMENT SERVICES LLC
220 ALHAMBRA CIRCLE
11TH FLOOR

CORAL GABLES, FL 33134 03 CORAL GABLES, FL 33134 US

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: 01/12/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition
Name: MERCANTIL COMMERCEBANK TRUST CO
Name: MERCANTIL COMMERCEBANK TRUST CO

Address: 220 ALHAMBRA CIR 11TH FL
City-St-Zip: CORAL GABLES, FL 33134

Address: 220 ALHAMBRA CIRCLE, 11TH FL
City-St-Zip: CORAL GABLES, FL 33134 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MERCANTIL COMMERCEBANK TRUST CO MGR 01/12/2009