

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000010269

**Entity Name:** CARIBINVEST2, LLC

**Current Principal Place of Business:**

2475 NW 16 ST RD #410  
MIAMI, FL 33126

**Current Mailing Address:**

PO BOX 227982  
MIAMI, FL 33222 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

OZIER-LAFONTAINE, MANUEL  
2475 NW 16 ST RD #410  
MIAMI, FL 33126 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:** DANIEL MELOIS

04/05/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name OZIER-LAFONTAINE, MANUEL  
Address 2475 NW 16 ST RD #410  
City-State-Zip: MIAMI FL 33126

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MANUEL OZIER- LAFONTAINE

PRESIDENT

04/05/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date