

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State

03-26-2003 90188 001 ***150.00

DOCUMENT # 589487
1. Entity Name
CARIB-INTERNATIONAL CHARTERS, INC.



Principal Place of Business
% JOSEPH EVANSON
1100 CLEVELAND ST., STE. 1617
CLEARWATER FL 33755
US

Mailing Address
% JOSEPH EVANSON
1100 CLEVELAND ST., STE. 1617
CLEARWATER FL 33755
US



2. Principal Place of Business
2401 West Bay DR

3. Mailing Address
2401 West Bay DR

Suite, Apt. #, etc.
Suite 101

Suite, Apt. #, etc.
Suite 101

City & State
LARGO FL

City & State
LARGO FL

4. FEI Number **NOT APPLICABLE**

Applied For
Not Applicable

Zip
33770

Country
Pinellas

Zip
33770

Country
Pinellas

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EVANSON, JOSEPH G.
1100 CLEVELAND ST.
SUITE 1617
CLEARWATER FL 33755

Name
Street Address (P.O. Box Number is Not Acceptable)
2401 West Bay DR
Suite 101
City **LARGO** FL **33770**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE **1/9/03**

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **PETERSON, ANDREW**
CITY-ST-ZIP **1100 CLEVELAND ST, SUITE 1617**
CLEARWATER FL 33755

TITLE ☒ Change ☐ Addition
NAME **C/O EVANSON**
STREET ADDRESS **2401 West Bay DR #701**
CITY-ST-ZIP **LARGO FL 33770**

TITLE ☐ Delete
NAME **VD**
STREET ADDRESS **PETERSON, SANDRA**
CITY-ST-ZIP **1100 CLEVELAND ST, SUITE 1617**
CLEARWATER FL 33755

TITLE ☒ Change ☐ Addition
NAME **C/O EVANSON**
STREET ADDRESS **2401 West Bay DR #101**
CITY-ST-ZIP **LARGO FL 33770**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **ANDREW PETERSON**

Date

Daytime Phone #

CR2E034 (10/02)