2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #653046

1. Entity Name

CARIBE INVESTMENTS OF NAPLES, INC.



FILED Mar 29, 2007 08:00 AM Secretary of State

Principal Place of Business

12275 COLLIER BLVD

14

NAPLES, FL 34116 US

Mailing Address

12275 COLLIER BLVD

14

DO NOT WRITE IN THIS SPACE

NAPLES, FL 34116 US



03022007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-1995918

Applied Fo

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EFRAIN, ARCE 3621 13TH AVE S.W. NAPLES, FL 34117

STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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 ac the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if apphable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FIGUEROA, GUILLERMO 201 MERMAIDS BIGHT NAPLES, FL 34103				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARCE, EFFRAIN 3621 13TH AVE S W NAPLES, FL				V00000681960 04/04/07-80068-009 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZAMBON, FRANCESCO 4380 27TH CT SW #410 NAPLES, FL 34116			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARCE, ISAIAS 3338 POINCIANA ST NAPLES, FL 34105			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CROWSON, JAMES 143 PALMETTO DUNES CT NAPLES, FL 34113				
TITLE					•

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or direct of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block changed, or on an attachment with appropriate the receiver of the corporation of the receiver of trusted empowered.