


FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90108 037 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 672157			
1. Entity Name CARIBE REALTY OF CENTRAL FLORIDA, INC			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 3245 LAKE TWYLO ROAD		3. Mailing Address 3245 LAKE TWYLO ROAD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State ORLANDO, FL		City & State ORLANDO, FL	
Zip 32817	Country	Zip 32817	Country
4. FEI Number		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name VICTOR MEJIAS			
Street Address (P.O. Box Number is Not Acceptable)			
3245 LAKE TWYLO DRIVE			
City ORLANDO		FL	Zip Code 32817
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____			
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDTYS Victor Mejias 3245 Lake Twylo Drive, Orlando, FL 32817	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Victor M. Mejias</i>		4/29/03	
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034B (12/02)