

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726238

FILED
Jan 18, 2008
Secretary of State

Entity Name: CARIBBEAN HOUSE CONDOMINIUM, INC

Current Principal Place of Business:

3665 N.E. 167TH STREET
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

3665 N.E. 167TH STREET
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 23-7441299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMMIRATI, MAGDALENA
3665 N.E. 167TH STREET
#506
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

MICELI, EDWARD
3665 N.E. 167TH STREET
#206
NORTH MIAMI BEACH, FL 33160 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: EDWARD MICELI

01/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AMMIRATI, MAGDALENA
Address: 3665 NE 167 ST #506
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VPD () Delete
Name: MICELI, EDWARD
Address: 3665 NE 167ST #206
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: ST () Delete
Name: VARGAS, JORGE E
Address: 3665 NE 167 ST #403
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MICELI, EDWARD
Address: 3665 NE 167 ST #206
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VPD (X) Change () Addition
Name: RAYMOND, JEAN MARIE
Address: 3665 NE 167ST #402
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: TD (X) Change () Addition
Name: JARRAMILLO, RAFAEL
Address: 3665 NE 167 ST #205
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: D () Change (X) Addition
Name: BARBA, ALICIA
Address: 3665 NE 167 ST #302
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD MICELI

PD

01/18/2008

Electronic Signature of Signing Officer or Director

Date