

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000000102

FILED
Jan 22, 2005
Secretary of State

Entity Name: CASA CARIBE DEVELOPMENT CORP.

Current Principal Place of Business:

590 MADISON AVENUE, SUITE 2100
NEW YORK, NY 10022

New Principal Place of Business:

300 PARK AVENUE
SUITE 1700
NEW YORK, NY 10022

Current Mailing Address:

590 MADISON AVENUE, SUITE 2100
NEW YORK, NY 10022

New Mailing Address:

300 PARK AVENUE
SUITE 1700
NEW YORK, NY 10022

FEI Number: 20-0228036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARPER, D. LEE
1920 MICHIGAN AVENUE
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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: D. LEE HARPER

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: CPT () Delete
Name: MACDONALD, R. FULTON
Address: 590 MADISON AVENUE, SUITE 2100
City-St-Zip: NEW YORK, NY 10022

Title: VC () Delete
Name: GOODRIDGE, STEVEN
Address: 27811 ATADEJO
City-St-Zip: MISSION VIEGO, CA 92692

Title: D () Delete
Name: DE ANGELIS, KAYCE
Address: 36 CLARKE DRIVE
City-St-Zip: E. NORTHPORT, NY 11731

Title: V () Delete
Name: SMITH, ROBERT
Address: 590 MADISON AVENUE, SUITE 2100
City-St-Zip: NEW YORK, NY 10022

Title: S () Delete
Name: BOSWELL, LAURA
Address: 590 MADISON AVENUE, SUITE 2100
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: MACDONALD, R. FULTON
Address: 590 MADISON AVENUE, SUITE 2100
City-St-Zip: NEW YORK, NY 10022

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DE ANGELIS, KAYLE
Address: 36 CLARKE DRIVE
City-St-Zip: E. NORTHPORT, NY 11731

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: R. FULTON MACDONALD

CEO

01/22/2005

Electronic Signature of Signing Officer or Director

Date