

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000000347

FILED
Feb 16, 2009
Secretary of State

Entity Name: CARIBBEAN OVERSEAS ENTERPRISES, LTD., INC.

Current Principal Place of Business:

440 GULF BLVD.
BELLEAIR SHORE, FL 33786 US

New Principal Place of Business:

Current Mailing Address:

440 GULF BLVD
BELLEAIR SHORE, FL 33786 US

New Mailing Address:

440 GULF BLVD.
BELLEAIR SHORE, FL 33786 US

FEI Number: 66-0405670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEPHART, JANET
440 GULF BLVD
BELLEAIR SHORE, FL 33786 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: KELLER, JURG
Address: TORHELGASSE 12, FL-9494
City-St-Zip: SCHAAN LICHTENSTEIN,

Title: V () Delete
Name: ETHRIDGE, GEORGE M
Address: P.O. BOX 6 (N/A)
City-St-Zip: ST THOMAS, US VIRGIN ISLAND,

Title: V () Delete
Name: KEPHART, JANET
Address: 440 GULF BLVD
City-St-Zip: BELLEAIR BEACH, FL 33786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: KELLER, JURG
Address: TORHELGASSE 12, FL-9494
City-St-Zip: SCHAAN LICHTENSTEIN, XX FL-9494

Title: V (X) Change () Addition
Name: ETHRIDGE, GEORGE M
Address: P.O. BOX 6 (N/A)
City-St-Zip: ST THOMAS, US VIRGIN ISLAND, VI 00802

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JANET KEPHART

V

02/16/2009

Electronic Signature of Signing Officer or Director

Date