FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F9600006461 (5

CARIBBEAN OPERATORS LTD. INCORPORATED

Principal Plac	e of Business	Mailing Address				E JABINDA 1118 IBING BEINE BRISE BASIL ABIN BATHS BASIN ANIE BEIRES BEIRE 1182 1001.				
7181 NW 21ST COURT SUNRISE FL 33313		7181 NW 21ST COURT SUNRISE FL 33313-3830								
						3. Date incorporated or Quit 12/11/1996	alified	3a. Da	te of Last R	eport
2. Principal P	'lace of Business	2a. Mailing Address 26				4. FEI Number APPLIED FOR	5-0	7067	20 No	oplied For ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required					
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Ζφ	Country	Zip	Count	ry	1	8. This corporation has liab				199.032,
24	25		30			Florida Statutes			_ No	
9. Name and Address of Current Registered Agent					Mana	10. Name and Address of h	IOM HO)istered A	1gent	
	LFE, LARRY		°	11	Name					
	A JOHN KNOX RD LAHASSEE FL 32303		8	2	Street Addre	ess (P.O. Box Number is Not Ad	ceptab	le)		
IALI	LANAGGEE PL 32303		8	13						
			8	4	City			FL	85 Zip	Code
11. Pursuant office or	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	2 and 607.1508, Florida Statut of Florida, Such change was a	es, the abo authorized	by 1	named corp the corporati	oration submits this statement fion's board of directors. I hereb	or the p	urpose of	changing it cintment as	ts registered registered
agent. La SIGNATURE										
	Signature, typical or printed name of registered age			gen	t signature require	ed when reinstating)	- AFFIC	DATE	DIDECTOL	DC (b) 40
12.	PSTD OFFICERS AN	D DIRECTORS DELETE	13. 1.1 TITLI			ADDITIONS/CHANGES TO	JOFFIC	ERS AND	Change	Addition
TITLE NAME	JOSEPH, BASIL R	C preside	1.2 NAM						C. Charles	
STREET ADDRESS	7181 NW 21ST COURT				ADORESS					
CITY - ST - ZIP	SUNRISE FL		1.4 CITY		· ·					
TITLE	VD	DELETE	2.1 TITU		- 4.0				☐ Change	Addition
NAME:	HARRY, BERNICE E		2.2 NAM	1E						1
STREET ADDRESS	7181 NW 21ST COURT		2.3 STRE	EET A	ADDRESS			1		
CHY-ST ZIP	SUNRISE FL		2.4 CIT	Y-S1	1 - ZIP					
mtf	D	DELETE	3.1 1111	E					Change	Addition
NAME	FORDE, VERONICA M		3.2 NAM	ΙE						
STREET ADDRESS	3610 NW 33RD AVENUE		3.3 STR	EET A	ADDRESS					
CHY-ST 7P	LAUDERDALE LAKES FL		3.4. CIT		T-ZIP				T-1 4.	1 4 3 199
TITLE		[]] DELETE	4.1 TITLI						Change	Addition
NAME			4. 2 NA							
STREET ADDRESS					ADDRESS					
TITLE		DELETE	4.4 CITY 5.1 TITL		- (1)				Change	Addition
NAME		L occur	5.7 MAN		·	ž at				
STREET ADDRESS			1		ADDRESS	3 · · · · · · · · · · · · · · · · · · ·				
CITY-ST ZIP			5 4 CITY							
TILLE		DELETE	6 1 TITL				:		Change	Addition
NAME			6.2 NAM			· ·			-	
STREET ADDRESS			i i		ADDRESS					

SIGNATURE

DLUME OFFICER OF SIGNED OFFICER OF

BERNICE HA

64 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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

4-22-97

FILED

Apr 30 1997 8:00am

Secretary of State

Daylime Phone # 0005457