

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008849

FILED
Apr 15, 2009
Secretary of State

Entity Name: CARIBBEAN ISLANDS TRAVEL, L.L.C.

Current Principal Place of Business:

3363 WEST COMMERCIAL BLVD.
SUITE 201
FT. LAUDERDALE, FL 33309 US

Current Mailing Address:

3363 W COMMERCIAL BLVD
SUITE 201
FORT LAUDERDALE, FL 33309 US

FEI Number: 65-1121582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, LUIS A CPA.
3363 W. COMMERCIAL BLVD.
SUITE 201
FT. LAUDERDALE, FL 33309 US

New Principal Place of Business:

3363 WEST COMMERCIAL BLVD.
SUITE 202
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

3363 W COMMERCIAL BLVD
SUITE 202
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

MEDINA, LUIS A CPA.
3363 W. COMMERCIAL BLVD.
SUITE 202
FT. LAUDERDALE, FL 33309 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:

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MEDINA, LUIS A CPA.
Address: 3363 W. COMMERCIAL BOULEVARD STE 201
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGR (X) Delete
Name: GONZALEZ, CARLOS
Address: 3363 WEST COMMERCIAL BLVD., SUITE 201
City-St-Zip: FORT LAUDERDALE, FL 33309

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MEDINA, LUIS A CPA.
Address: 3363 W. COMMERCIAL BOULEVARD STE 202
City-St-Zip: FORT LAUDERDALE, FL 33309

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GEORGIA L DIXON

ACCT

04/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date