

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052555

FILED
May 22, 2008
Secretary of State

Entity Name: CARIBBEAN REALESTATE DEVELOPERS,"LLC"

Current Principal Place of Business:

9219 VIA CLASSICO EAST
WELLINGTON, FL 33411

New Principal Place of Business:

Current Mailing Address:

9219 VIA CLASSICO EAST
WELLINGTON, FL 33411

New Mailing Address:

FEI Number: 76-0829015 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ZERVAS, JOHN
9219 VIA CLASSICO EAST
WELLINGTON, FL 33411 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ZERVAS, JOHN
Address: 9219 VIA CLASSICO EAST
City-St-Zip: WELLINGTON, FL 33411 US

Title: MGRM () Delete
Name: PAGES, HECTOR O
Address: PO BOX 94222
City-St-Zip: SAN JUAN, PR 00908 OC

Title: MGRM () Delete
Name: PAGES, HECTOR C
Address: PO BOX 195288
City-St-Zip: SAN JUAN, PR 009195288 OC

ADDITIONS/CHANGES:

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

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 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: JOHN ZERVAS

MGRM

05/22/2008

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