2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #L14765

1. Entity Name CAROLINA CARIBBEAN CORP.

FILED Feb 07, 2007 08:00 AM Secretary of State

Principal Place of Business

947 HYACINTH DELRAY BEACH, FL 33483 US Mailing Address

947 HYACINTH

DELRAY BEACH, FL 33483



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01172007	No Chg-P	CR2E034 (11/05)

4. FEI Number 65-0148187 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

8. Name and Address of Current Registered Agent

MALLOY, SUSAN 947 HYACINTH DR DELRAY BCH, FL 33483

SIGNATURE:

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the plans of registered agent.	ourpose of changing its registe	ered office or registered agent, or b	oth, in the State of Florida I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and tale	d applicable. (NOTE: Regate	ered Agent agreture required when reinstating)	DATE
	É NOW!!! FEE IS \$150.00 by 1, 2007 Fee will be \$550.00	Election Campaign Fin. Trust Fund Contribution		
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALLOÝ, SUSAN 947 HYACINTH DELRAY BEACH, FL			
TITLE NAME STREET ADDRESS CITY-SI-ZIP				U00000625442 02/14/07-80074-020 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS CTTY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
indicated of the cor	on this report or supplemental report is true.	and accurate and that my sign d to execute this report as req	nature shall have the same legal effe	 Florida Statutes. I further certify that the information sot as if made under oath; that I am an officer or director tes; and that my name appears in Block 10 or Block 11 if

OFFICER OR DIRECTOR