13. I 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 report or supplemental 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 appears in Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP

ALTURE GERALDE BALLAS.

7/15/00.

(305) 256-1464 Daytime Phone #

APPROVER

CR2E034 (5/00)



June 26, 2000

Florida Department of State
Division of Corporations
c/o Uniform Business Report Fillings
P.O Box 1500
Tallahassee, Florida 32302-1500

Reference: 2000 UB Report for Caribe Natural Inc., Document #L50214.

Dear Sir(s),

Our firm prepares the taxes, financial statements and related business documentation for the above-mentioned corporation which includes the annual report.

This year our offices were robbed and some of the documents were lost and (or) stolen. Unfortunately, the UB**R** 2000 for Caribe Natural was one of those documents missing. The confusion has caused the client to file late. If you search through Caribe Natural's records you'll find the company always files on time. Due to these unforeseen circumstances of which my client is not at fault, I respectfully request the penalty be waived. I have attached the regular filling fee and give my sincerest apology.

Thank you

Richard F. Toro

President