2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64182

City-St-Zip:

FILED Jun 21, 2005 Secretary of State

Entity Name: CARIBBEAN PUBLISHING CO., INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
815 NW 57 SUITE 125 MIAMI, FL	TH AVENUE 33126 US				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
815 NW 57 SUITE 125 MIAMI, FL	TH AVENUE 33126 US				
FEI Number:	65-0193859	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
CORPDIRECT AGENTS 103 N MERIDIAN ST, LOWER LEVEL TALLAHASSEE, FL 32301 US			515 EAST PARK AVEN TALLAHASSEE, FL 32	CORPDIRECT AGENTS 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 US	
The above in the State		ubmits this statement for the pu	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE: ED LARY				06/21/2005	
Electronic Signature of Registered Agent			nt	Date	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FRENCH, RAND	REET PO BOX HM902	Title: (Name: Address: City-St-Zip:)Change()Addition	
Title: Name: Address: City-St-Zip:	REID, DAVID	Delete .VENUE, P.O. BOX 688 GT I, GC	Title: (Name: Address: City-St-Zip:)Change ()Addition	
Title: Name: Address:	CAYMANMANAG	Delete SEMENT SER, VICES LTD. R HARBOUR CENTER	Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DAVID REID CEO 06/21/2005

GEORGETOWN, GRAND CAYMAN, CA