

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90084 023 ***150.00

DOCUMENT # M46126

1. Entity Name
CARIBE HOMES CORP.

Principal Place of Business
 11755 SW 90 ST.
 SUITE #203
 MIAMI FL 33176
 US

Mailing Address
 11755 SW 90 ST.
 SUITE #203
 MIAMI FL 33176
 US



2. Principal Place of Business
11755 S.W 90th Street
 Suite, Apt. #, etc.
210

3. Mailing Address
11755 S.W 90th Street
 Suite, Apt. #, etc.
210

DO NOT WRITE IN THIS SPACE

City & State
miami, Florida

City & State
miami, Florida

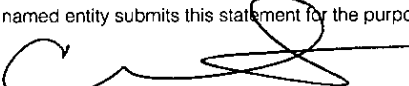
4. FEI Number **59-2771491** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
MARTINEZ, CARLOS
11755 SW 90 ST.
SUITE #203
MIAMI FL 33176

7. Name and Address of New Registered Agent
 -Name
Martinez, Carlos E
 Street Address (P.O. Box Number is Not Acceptable)
11755 S.W 90th Street
Suite 210
 City **miami** FL Zip Code **33186**

8. 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  DATE **3/8/02**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MARTINEZ, CARLOS E. 14260 SW 119 AVE MIAMI FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 11755 S.W 90th Street Suite 210 miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARTINEZ, MARIANA 14260 SW 119 AVE MIAMI FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 11755 S.W 90th Street Suite 210 miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, EMILIO F. 14260 SW 119 AVE MIAMI FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition 11755 S.W 90th Street Suite 210 miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MARTINEZ, RAUL A. 14260 SW 119 AVE MIAMI FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition 11755 S.W 90th Street Suite 210 miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MARTINEZ, FERNANDO I 14260 SW 119 AVE MIAMI FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition 11755 S.W 90th Street Suite 210 miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARTINEZ, EMILIO J 14260 SW 119 AVE MIAMI FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition 11755 SW 90th Street Suite 210 miami, FL 33186

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **3/8/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2EN34 (01/01)