

FILED
Mar 12, 2003 8:00 am
Secretary of State

03-12-2003 90085 037 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M58430

1. Entity Name
CARIBBEAN . PACIFIC TRADING COMPANY



Principal Place of Business
~~17 ROSE DRIVE~~
FT LAUDERDALE FL 33316-1041
US

Mailing Address
~~17 ROSE DRIVE~~
FT LAUDERDALE FL 33316-1041
US



2. Principal Place of Business
616 Fourth Key Drive
Suite, Apt. #, etc.

3. Mailing Address
616 Fourth Key Drive
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale, FL

4. FEI Number 65-0003652

Applied For
Not Applicable

Zip
33304

Country
USA

Zip
33304

Country
USA

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

6. Name and Address of Current Registered Agent

FEINERMAN, STANLEY S.
~~17 ROSE DRIVE~~
FT LAUDERDALE FL 33316-1041

7. Name and Address of New Registered Agent

Name
Stanley S. Feinerman
Street Address (P.O. Box Number is Not Acceptable)

616 Fourth Key Drive
City Ft. Lauderdale FL Zip Code 33304

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Stanley S. Feinerman Stanley S. Feinerman, Pres. 1/27/03
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DP	FEINERMAN, STANLEY S.	616 FOURTH KEY DR	FORT LAUDERDALE FL 33304	<input type="checkbox"/>
VPD	FEINERMAN, GLORETTE A.	616 FOURTH KEY DR	FORT LAUDERDALE FL 33304	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stanley S. Feinerman* Stanley S. Feinerman, Pres. 1/27/03 954 467-7754
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)