

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M62772

FILED
Apr 20, 2009
Secretary of State

Entity Name: CARIBBEAN CONNECTION RESTAURANT & LOUNGE, INC.

Current Principal Place of Business:

11275 NW 27TH AVENUE
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

9999 N.W. 89TH AVENUE, BAY 15
MEDLEY, FL 33178

New Mailing Address:

FEI Number: 65-0014049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANSOH, RICHARD O.
2600 DOUGLAS ROAD
SUITE 1100
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THORPE, KEITH
Address: 9999 N.W. 89TH AVENUE, BAY 15
City-St-Zip: MEDLEY, FL 33178

Title: VS (X) Delete
Name: THORPE, MARCIA
Address: 9999 N.W. 89TH AVENUE, BAY 15
City-St-Zip: MEDLEY, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THORPE, MARCIA L
Address: 9999 N.W. 89TH AVENUE, BAY 15
City-St-Zip: MEDLEY, FL 33178

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: MARCIA THORPE

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date