

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000007931

FILED
Aug 29, 2002
Secretary of State

Entity Name: CARIBBEAN CULTURAL EXCHANGE INC

Current Principal Place of Business:

4202 E. FOWLER AVENUE
CTR 2407
TAMPA, FL 33620

New Principal Place of Business:

Current Mailing Address:

4202 E. FOWLER AVENUE
CTR 2407
TAMPA, FL 33620

New Mailing Address:

FEI Number: 59-2650049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDDIE, ANDREW
13709 PLAZA CT
19
TAMPA, FL 33613

Name and Address of New Registered Agent:

REDDIE, ANDREW
4309 AVALON SUITES TERRACE
401A
TAMPA, FL 33613

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: ANDREW REDDIE

08/29/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR () Change (X) Addition
Name: SMALL, TYVI MR
Address: 4202 E FOWLER AVE
City-St-Zip: TAMPA, FL 33620

Title: DIR () Change (X) Addition
Name: CARIBBEAN CULTURAL A, SSOCIATION
Address: P.O. BOX 2021
City-St-Zip: LUTZ, FL 33559

Title: OFFI () Change (X) Addition
Name: REID-THOMAS, DEIDRE MS
Address: 14535 BRUCE B. DOWNS BLVD. # 613
City-St-Zip: TAMPA, FL 33613

Title: OFFI () Change (X) Addition
Name: REDDIE, ANDREW M OFFICER
Address: 4309 PLAZA CT
City-St-Zip: TAMPA, FL 33613

Title: DIR () Change (X) Addition
Name: DACE, TRACEY MR
Address: 4202 E FOWLER AVE
City-St-Zip: TAMPA, FL 33620

Title: DIR () Change (X) Addition
Name: ARMSTRONG, DAVID MR
Address: 4202 E FOWLER AVE
City-St-Zip: TAMPA, FL 33620

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW REDDIE

MR

08/29/2002

Electronic Signature of Signing Officer or Director

Date