

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000008129

FILED
Oct 19, 2004
Secretary of State**Entity Name:** UNITED CARIBBEAN CULTURAL ORGANIZATION OF THE PALM BEACHES, INC.**Current Principal Place of Business:**4289 COCONUT RD.
LAKE WORTH, FL 33461**New Principal Place of Business:****Current Mailing Address:**4289 COCONUT RD.
LAKE WORTH, FL 33461**New Mailing Address:****FEI Number:** 80-0026717 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**WORDSMAN, JAMES B
4289 COCONUT RD.
LAKE WORTH, FL 33461 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

OFFICERS AND DIRECTORS:**Title:** PRO () Delete
Name: HOSEIN, INSHAN
Address: 4220 PINE HOLLOW CR.
City-St-Zip: GREEN ACRES, FL 33463**Title:** PD () Delete
Name: NANLAL, KENNETH B
Address: 1531 NANETTE COURT
City-St-Zip: LAKE WORTH, FL 33461**Title:** VD () Delete
Name: SOODEEN, JIM
Address: 921 SE 2ND AVENUE
City-St-Zip: DELRAY BEACH, FL 33445**Title:** TD () Delete
Name: WORDSMAN, JAMES B
Address: 5030 N.W. 6TH STREET
City-St-Zip: DELRAY BEACH, FL 33445**Title:** SD () Delete
Name: RAMPERSAD, JENNY
Address: 12585 KEYLIME BLVD.
City-St-Zip: ROYAL PALM BEACH, FL 33412**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

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: KENNETH B. NANLAL

PRES

10/19/2004

Electronic Signature of Signing Officer or Director

Date