

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004445

FILED
Mar 26, 2008
Secretary of State

Entity Name: UNITED CARIBBEAN ARTISTS ART GALLERY, INC.

Current Principal Place of Business:

2134 LOU DR. W.
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 57183
JACKSONVILLE, FL 32241

New Mailing Address:

FEI Number: 32-0020173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLEURY, DICKENSON
5800 W. UNIVERISTY BLVD
#329
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

CASSEUS, CANTAVE
2134 LOU DR. W.
JACKSONVILLE, FL 32216 US

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: CANTAVE CASSEUS

03/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: FLEURY, DICKENSON
Address: 5800 W. UNIVERITY BLVD., APT 329
City-St-Zip: JACKSONVILLE, FL 32216

Title: CEO () Delete
Name: CASSEUS, CANTAVE
Address: 8238 LOCK SEAFORTH LANE
City-St-Zip: JACKSONVILLE, FL 32244

Title: S () Delete
Name: VICTOR, ROGER
Address: 150 BAY TOWN CIRCLE
City-St-Zip: JACKSONVILLE, FL 32246

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: CASSEUS, CANTAVE
Address: 2134 LOU DR. W
City-St-Zip: JACKSONVILLE, FL 32216

Title: CEO (X) Change () Addition
Name: CASSEUS, SUZE V
Address: 2134 LOU DR. W
City-St-Zip: JACKSONVILLE, FL 32216

Title: S (X) Change () Addition
Name: FLEURY, DICKENSON
Address: 13605 N. 42ND ST. # 1201
City-St-Zip: TAMPA, FL 33613

Title: T () Change (X) Addition
Name: MIDI, HERMITE F
Address: 7100 S. ORANGE BLOSSOM TR. # 417
City-St-Zip: ORLANDO, FL 32809

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

SIGNATURE: SUZE V CASSEUS

CEO

03/26/2008

Electronic Signature of Signing Officer or Director

Date