2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 30, 2005
Secretary of State

DOCUMENT# N03000009559

Entity Name: CARIBBEAN AMERICAN BUSINESS ASSOCIATION (CABA), INC.

Current Principal Place of Business:

158 WATERSIDE DRIVE
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1552
DELRAY BEACH, FL 33447

New Mailing Address:

158 WATERSIDE DRIVE
LANTANA, FL 33462

FEI Number: 20-0394793 **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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: NATALIA UTRERA

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: JOSEPH, MARCUS
Address: 158 WATERSIDE DRIVE
City-St-Zip: LANTANA, FL 33462

Title: VSD ( ) Delete
Name: JOSEPH, LINCOLN
Address: 158 WATERSIDE DRIVE
City-St-Zip: LANTANA, FL 33462

Title: D ( ) Delete
Name: JOSEPH, PHILIPPE
Address: 158 WATERSIDE DRIVE
City-St-Zip: LANTANA, FL 33462

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:

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: LINCOLN JOSEPH VSD 09/30/2005

Electronic Signature of Signing Officer or Director — Date