## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000009559

FILED Feb 14, 2007 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

158 WATERSIDE DRIVE 704 SOUTH SWINTON AVE. LANTANA, FL 33462 DELRAY BEACH, FL 33444

Current Mailing Address: New Mailing Address:

158 WATERSIDE DRIVE 704 SOUTH SWINTON AVE. LANTANA, FL 33462 DELRAY BEACH, FL 33444

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: Name and Address of New Registered Agent:

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

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PTD () DeleteTitle:PTD (X) Change () AdditionName:JOSEPH, MARCUSName:JOSEPH, MARCUSAddress:158 WATERSIDE DRIVEAddress:704 SOUTH SWINTON AVE.City-St-Zip:LANTANA, FL 33462City-St-Zip:DELRAY BEACH, FL 33444

Title: VSD ( ) Delete Title: VSD (X) Change ( ) Addition Name: JOSEPH, LINCOLN Name: JOSEPH, LINCOLN

Name:JOSEPH, LINCOLNName:JOSEPH, LINCOLNAddress:158 WATERSIDE DRIVEAddress:704 SOUTH SWINTON AVE.City-St-Zip:LANTANA, FL 33462City-St-Zip:DELRAY BEACH, FL 334444

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 JOSEPH, PHILIPPE
 Name:
 JOSEPH, PHILIPPE

 Address:
 158 WATERSIDE DRIVE
 Address:
 704 SOUTH SWINTON AVE.

 City-St-Zip:
 LANTANA, FL 33462
 City-St-Zip:
 DELRAY BEACH, FL 33444

I hereby certify that the information supplied with this filing does not qualify for the 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: LINCOLN JOSEPH VSD 02/14/2007