2004 NON PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003260

Apr 21, 2004 Secretary of State

Entity Name: CARIBBEAN AMERICAN CHAMBER OF COMMERCE OF FLORIDA, INC.

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

2250 LEE RD. STE. 202 611 WYMORE ROAD WINTER PARK, FL 32789 202

WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

P.O. BOX 1500 ORLANDO, FL 32802

FEI Number: 59-3123016 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARIBBEAN AMERICAN CHAMBER CARIBBEAN AMERICAN CHAMBER 2250 LEE RD. STE. 202

611 WYMORE ROAD WINTER PARK, FL 32789 US 202

WINTER PARK, FL 32789 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: LEO MENDEZ 04/21/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition SPENCE, PETER D MENDEZ, LEO

Name: Name: PO BOX 560403 611 WYMORE ROAD SUITE 202 Address: Address: City-St-Zip: ORLANDO, FL 32856 City-St-Zip: WINTER PARK, FL 32789

Title: Title: () Delete (X) Change () Addition

Name: MENDEZ, LEO Name: ALLONG, ANDRE

611 WYMORE ROAD, SUITE 202 611 WYMORE ROAD, SUITE 202 Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789

() Delete Title: Title: (X) Change () Addition

DORCEAN, MICHEL SPENCE, PETER Name: Name: 2250 LEE ROAD, SUITE 202 P.O. BOX 560403 Address: Address: WINTER PARK, FL 32789 City-St-Zip: ORLANDO, FL 32856 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

ALLONG, ANDRE SHERIFF, MARY ANN Name: Name:

Address: 611 WYMORE ROAD, SUITE 202 Address: 3877 AVALON PARK BOULEVARD EAST

City-St-Zip: WINTER PARK, FL 327898 City-St-Zip: ORLANDO, FL 32828

Title: Title: () Delete () Change () Addition

ASHLEY-JONES, BARBARA Name: Name: 1207 SHOW DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip:

Title: () Delete Title: () Change () Addition

BAKSH, MUSTAPHA Name: Name: 8129 GRANADA BLVD Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32836

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

SIGNATURE: LEO MENDEZ С 04/21/2004 DEREK LLOYD, D 8708 LIBERTY PLACE TAMPA, FL 33615

SOLANGE BENOIT, D 8708 LIBERTY PLACE TAMPA, FL 33615

JOHN MUNRO, D 1720 LEE ROAD WINTER PARK, FL 32789

PAMELA JOSEPH, D 5104 N ORANGE BLOSSOM TRAIL, SUITE 115 ORLANDO, FL 32810

ANNE MARIE DE GOVIA, D P.O. BOX 161991 ORLANDO, FL 32816

KARL CHUNG, D 455 DOUGLAS AVE, SUITE 2255D ALTAMONTE SPRINGS, FL 32714

MARJORIE BROWN, D 4809 TELLESON PLACE ORLANDO, FL 32812

GERALD BOURNE, D 221 WEST LONGCREEK COVE LONGWOOD, FL 32750

MICHEL DORCEAN, D 2250 LEE ROAD, SUITE 202 WINTER PARK, FL 32789