

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008268

FILED
Feb 19, 2008
Secretary of State

Entity Name: CARIBBEAN UNITED INC.

Current Principal Place of Business:

1108 GARNETT STREET
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3374
LANTANA, FL 33465

New Mailing Address:

FEI Number: 74-3228733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AVRIL, JOSEPH H
1108 GARNETT ST
LANTANA, FL 33462 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: PD () Delete
Name: AVRIL, JOSEPH H
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL 33462

Title: AS () Delete
Name: HAYDEN, MICKECIA
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL 33462

Title: VP () Delete
Name: BELLANTON, RONALD
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL 33462

Title: C () Delete
Name: DESPAGNE, HANS
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL

Title: T () Delete
Name: MCKINLEY, LAURA
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL 33462

Title: AT () Delete
Name: LOSIER, DAVID
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: DESPAGNE, HANS
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL 33462

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MCKINLEY, LAURA
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL

Title: AT (X) Change () Addition
Name: LOSIER, DAVID
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL 33462

Title: AS (X) Change () Addition
Name: MICKECIA, HAYDEN
Address: 1108 GARNETT ST
City-St-Zip: LANTANA, FL 33462

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: JOSEPH AVRIL

PD

02/19/2008

Electronic Signature of Signing Officer or Director

Date