2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008681

FILED Feb 13, 2009 Secretary of State

Entity Name: ONE CARIBBEAN INTERNATIONAL, INC.

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

1075 SUNSET STIP, SUITE 212 SUNRISE, FL 33313

Current Mailing Address: New Mailing Address:

1075 SUNSET STIP, SUITE 212 SUNRISE, FL 33313

FEI Number: 26-0828644 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:

SPIEGEL & UTRERA, P.A. TURNER, ANDREW 1840 SW 22ND ST. 1075 SUNSET STIP, 4TH FLOOR 212 MIAMI, FL 33145 US SUNRISE, FL 33313 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: A.TURNER 02/13/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

CEO (X) Change () Addition () Delete

TURNER, ANDREW TURNER, ANDREW Name: Name: 1075 SUNSET STIP, SUITE 212 Address: 1075 SUNSET STIP, SUITE 212 Address:

City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

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

TURNER, ANDREW Name: Name: BLAIR, NIGEL

Address: 1075 SUNSET STIP, SUITE 212 Address: 1075 SUNSET STIP, SUITE 212

City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

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

BLAIR, NIGEL Name: WILLIAMS, PEDDYLEE Name: 1075 SUNSET STIP, SUITE 212 1075 SUNSET STIP, SUITE 212 Address: Address:

City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

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: ANDREW TURNER Ρ 02/13/2009