

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2009  
Secretary of State**

DOCUMENT# N08000000013

Entity Name: CARIBBEAN CULTURAL AFFAIRS INC.

**Current Principal Place of Business:**

5349 NW 35TH AVE  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

5349 NW 35TH AVE  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 26-1646774      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BULKAN, ANDREW  
5349 NW 35TH AVE  
FT LAUDERDALE, FL 33309      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: P      ( ) Delete  
Name: BULKAN, ANDREW  
Address: 5349 NW 35TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: S      ( ) Delete  
Name: DEBAH, MEGNAUTH  
Address: 5349 NW 35TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: T      ( ) Delete  
Name: SINGH, VISHNU  
Address: 5349 NW 35TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T      (X) Change ( ) Addition  
Name: BULKAN, JEROME  
Address: 5349 NW 35TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

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 BULKAN

P

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date