

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000000323

FILED
Oct 12, 2005
Secretary of State

Entity Name: FCCA FOUNDATION FOR THE CARIBBEAN, INC.

Current Principal Place of Business:

11200 PINES BLVD., STE. 201
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

11200 PINES BLVD., STE. 201
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 65-0378064 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

PAIGE, MICHELE M
11200 PINES BLVD
STE 201
PEMBROKE PINES, FL 33026 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: MICHELE M. PAIGE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: ARISON, MICKY
Address: 3655 N.W. 87 AVE
City-St-Zip: MIAMI, FL 33178

Title: PSD () Delete
Name: PAIGE, MICHELE M
Address: 11200 PINES BLVD., STE. 201
City-St-Zip: PEMBROKE PINES, FL 33026

Title: TD () Delete
Name: SASSO, RICHARD E
Address: 11200 PINES BLVD- STE 201
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D () Delete
Name: KATSOUFIS, PARIS
Address: 11200 PINES BLVD., STE. 201
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D () Delete
Name: NIELSON, STEPHEN A
Address: 11200 PINES BLVD., STE. 201
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D () Delete
Name: VEITCH, COLIN
Address: 11200 PINES BLVD., STE. 201
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

SIGNATURE: MICHELE M. PAIGE

PSD

10/12/2005

Electronic Signature of Signing Officer or Director

Date