

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90066 048 ****61.25

DOCUMENT # N96000002402

1. Entity Name

CARIBBEAN SOUTH AMERICAN COUNCIL, INC.

Principal Place of Business

Mailing Address

**12 AMBROSE AVE
 BAY POINT CA 94565**

**12 AMBROSE AVE
 BAY POINT CA 94565**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0663149

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SINGH-BHAIRO, SERGIO D
 1364 SILVERADO
 POMPANO FL 33068**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
 min. will be \$236.25.**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME SINGH-BHAIRO, SERGIO D
 STREET ADDRESS 12 AMBROSE AVE
 CITY-ST-ZIP BAY POINT CA 94565

TITLE ☐ Change ☒ Addition
 NAME Dymally Mervyn
 STREET ADDRESS 12 Ambrose Ave
 CITY-ST-ZIP Bay Point CA 94565 Secretary

TITLE VP ☐ Delete
 NAME SINGH-BHAIRO, JEWEL S
 STREET ADDRESS 1364 SILVERADO
 CITY-ST-ZIP POMPANO FL 33068

TITLE ☐ Change ☒ Addition
 NAME NARAINNE Ralph
 STREET ADDRESS 12 Ambrose Ave
 CITY-ST-ZIP Bay Point Director

TITLE VPD ☐ Delete
 NAME SINGH-BHAIRO, ROLAND CHRIS
 STREET ADDRESS 12 AMBROSE AVE
 CITY-ST-ZIP BAY POINT CA 94565

TITLE ☐ Change ☒ Addition
 NAME Tara D. Singh
 STREET ADDRESS 1364 Silverado
 CITY-ST-ZIP North Lauderdale FL 33068 Director

TITLE TFCD ☐ Delete
 NAME SINGH BHAIRO, GRACE
 STREET ADDRESS 12 AMBROSE AVE
 CITY-ST-ZIP BAY POINT CA 94565

TITLE ☐ Change ☒ Addition
 NAME LOUIS Conejo
 STREET ADDRESS 12 Ambrose Ave
 CITY-ST-ZIP Bay Point CA 94565 Dir

TITLE 2VP ☐ Delete
 NAME DREPAUL, MILTON
 STREET ADDRESS 12 AMBROSE AVE
 CITY-ST-ZIP BAY POINT CA 94565

TITLE ☐ Change ☒ Addition
 NAME Haimdath Samh
 STREET ADDRESS 12 Ambrose Ave
 CITY-ST-ZIP Bay Point CA 94565

TITLE S ☒ Delete
 NAME MERVYN, DYMAITY
 STREET ADDRESS 12 AMBROSE AVE
 CITY-ST-ZIP BAY POINT CA 94565

TITLE ☐ Change ☒ Addition
 NAME Taylor Sean
 STREET ADDRESS 12 Ambrose Ave
 CITY-ST-ZIP Bay Point CA 94565

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

8/30/02

95 351-3537.

CR2E037 (4/02)