

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002856

FILED
Apr 27, 2009
Secretary of State

Entity Name: CARIBBEAN NATIONAL CULTURAL ASSOCIATION INC.

Current Principal Place of Business:

2632 NW 65TH AVE.
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

PO BOX 25342
TAMARAC, FL 33320

New Mailing Address:

FEI Number: 65-0874549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDIAL, DENNIS
2632 NW 65TH AVE.
MARGATE, FL 33063 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: DP () Delete
Name: NARAIN, PAMELA
Address: 2632 NW 65TH AVE.
City-St-Zip: MARGATE, FL 33063

Title: DT () Delete
Name: DENNIS, HARDIAL
Address: 2632 NW 65TH AVE.
City-St-Zip: MARGATE, FL 33063

Title: DS () Delete
Name: CAMPBELL, MARJORIE
Address: 9551 NW 20TH PLACE
City-St-Zip: SUNRISE, FL 33320

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:

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: DENNIS HARDIAL

DT

04/27/2009

Electronic Signature of Signing Officer or Director

Date