

**FILED**  
**Sep 08, 2003 8:00 am**  
**Secretary of State**

09-08-2003 90140 028 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # P00000020884**

1. Entity Name  
**CARIBBEAN IMPORTS, INC.**



Principal Place of Business  
P. O. BOX 617308  
ORLANDO, FL 32861-7308

Mailing Address  
P. O. BOX 617308  
ORLANDO, FL 32861-7308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number  
**59-3634597**

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

**ATENCIO, EURO A**  
**6555 N.W. 36TH STREET**  
**MIAMI, FL 33166**

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$650.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**PD**  
**ATENCIO, EURO A**  
**6555 N.W. 36TH STREET**  
**MIAMI, FL 33166**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VD**  
**ATENCIO, MARIA D**  
**5176 E. WIND DR.**  
**ORLANDO, FL 32819**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

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 607, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**8-23-03**

Date

Daytime Phone #

CP2EC034 (10/02)

ATTACHMENT  
#P00000020884  
80145123

**Caribbean Imports, Inc.**

P.O. Box 617308 Orlando, FL 32861-7308 Phone (407) 351-2223

August 23<sup>rd</sup>, 2003

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

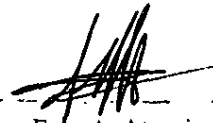
Reference: 2003 for Profit Corporation Uniform Business Report (UBR)  
For Caribbean Imports, Inc. Document # P00000020884

Dear Sir or Madam:

It has always been our most interest to do everything that relates to our corporation on time. Regrettably, it does not depend on us alone but also on your office. Every year, we received your Uniform Business Report in the mail before May first. This year and as of this date, we have not received your report.

Please, see the enclosed check for the filing fees of \$150.00 and a copy from the Internet of the UBR for the year 2003.

Very Truly Yours,



Euro A. Atencio  
President of Caribbean Imports, Inc.