

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000024065

FILED
Apr 10, 2002 8:00 AM
Secretary of State

Entity Name: CARIBBEAN POWER CORPORATION

Current Principal Place of Business:

9674 NW 25 ST
MIAMI, FL 33172

New Principal Place of Business:

8249 NW 36 ST
204
MIAMI, FL 33166

Current Mailing Address:

9674 NW 25 ST
MIAMI, FL 33172

New Mailing Address:

8249 NW 36 ST
204
MIAMI, FL 33166

FEI Number: 65-0988154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, RAFAEL
9674 NW 25 ST
MIAMI, FL 33172

Name and Address of New Registered Agent:

GOMEZ, RAFAEL
8249 NW 36 ST
204
MIAMI, FL 33166

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: RAFAEL GOMEZ

04/10/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOMEZ, RAFAEL
Address: 9674 NW 25 ST
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOMEZ, RAFAEL
Address: 8249NW 36 ST
City-St-Zip: MIAMI, FL 33166

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

SIGNATURE: RAFAEL GOMEZ

D

04/10/2002

Electronic Signature of Signing Officer or Director

Date