

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90285 034 ***150.00

DOCUMENT # P00000025385

1. Entity Name
CARIBBEAN GLOBAL INTERNATIONAL, INC.

Principal Place of Business

312 WESTWARD DR #4
MIAMI SPRINGS FL 33166

Mailing Address

312 WESTWARD DR #4
MIAMI SPRINGS FL 33166

2. Principal Place of Business

27501 S. Dixie Hwy
Suite, Apt. #, etc.
408

3. Mailing Address

27501 S. Dixie Hwy
Suite, Apt. #, etc.
408

City & State

Naranja, FL 33032

City & State

Naranja, FL 33032

4. FEI Number

65-1002589

Applied For

Not Applicable

Zip

33032

Country

USA

Zip

33032

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WERMUTH, J. MICHAEL
8300 NW 53RD ST., SUITE 308
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

Merland J. Conine

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

2871 Sunrise Lakes Dr E.

City

Sunrise

FL

Zip Code

33302

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.

SIGNATURE Merland J. Conine

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-29-02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

FILE NOW!!! FEES \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **PT**
STREET ADDRESS **HENDRICKSON, WILLIAM A**
CITY-ST-ZIP **5215 MARINE PARKWAY**
NEW PORT RICHEY FL 34652

TITLE ☐ Delete
NAME **VS**
STREET ADDRESS **CONINE, MERLAND J**
CITY-ST-ZIP **312 WESTWARD DRIVE #4**
MIAMI SPRINGS FL 33166

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME **VP Operations, Secretary**
STREET ADDRESS **2871 Sunrise Lakes Dr., E.**
CITY-ST-ZIP **Sunrise, FL 33322**

TITLE ☐ Change ☒ Addition
NAME **Director**
STREET ADDRESS **Mark Fisher**
CITY-ST-ZIP **27501 S. Dixie Highway**
Naranja, FL 33032

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Merland J. Conine, VP Operations

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

305-582-1154
305-245-0086

Daytime Phone #

CR2E034 (9/01)