

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000044920

Entity Name: CARIBBEAN RESOURCES, INC.

FILED
Jan 17, 2008
Secretary of State

Current Principal Place of Business:

95 MERRICH WAY
#525
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

95 MERRICH WAY
#525
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-1011113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVEN, SILVERMAN ESQ
9500 SOUTH DADELAND BLVD
550
MIAMI, FL 33156 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SIEGEL, ELEANOR
Address: 2 GROVE ISLE DR., APT. 1410
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SIEGEL, ELEANOR
Address: 2 GROVE ISLE DR., APT. 1410
City-St-Zip: COCONUT GROVE, FL 33133

Title: VPD () Change (X) Addition
Name: SIEGEL, NORMAN
Address: 2 GROVE ISLE DR. APT 1410
City-St-Zip: COCONUT GROVE, FL 33133

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

SIGNATURE: ELEANOR SIEGEL

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01/17/2008

Electronic Signature of Signing Officer or Director

_____ Date