

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000051668

FILED
Mar 18, 2003
Secretary of State

Entity Name: CARIBE VILLAS CORP.

Current Principal Place of Business:

11755 S.W. 90TH STREET.
STE 210
MIAMI, FL 33186

New Principal Place of Business:

11755 S.W. 90TH STREET
SUITE 210
MIAMI, FL 33186

Current Mailing Address:

11755 S.W. 90TH STREET.
STE 210
MIAMI, FL 33186

New Mailing Address:

11755 S.W. 90TH STREET
SUITE 210
MIAMI, FL 33186

FEI Number: 65-1015290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNAIZ, MIREN
11755 S.W. 90TH STREET.
STE 210
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

ARNAIZ, MIREN
11755 S.W. 90TH STREET
STE 210
MIAMI, FL 33186 US

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:

03/18/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINEZ, CARLOS E
Address: 11755 SW 90TH ST # 210
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: MARTINEZ, RAUL A
Address: 11755 SW 90TH ST # 210
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: MARTINEZ, EMILIO J
Address: 11755 SW 90TH ST # 210
City-St-Zip: MIAMI, FL 33186

Title: T () Delete
Name: MARTINEZ, EMILIO F
Address: 11755 SW 90TH ST # 210
City-St-Zip: MIAMI, FL 33186

Title: S () Delete
Name: ARNAIZ, MIREN
Address: 11755 SW 90TH ST # 210
City-St-Zip: MIAMI, FL 33186

Title: AS () Delete
Name: MARTINEZ, FERNANDO I
Address: 11755 SW 90TH ST # 210
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MARTINEZ, RAUL A
Address: 11755 SW 90TH ST # 210
City-St-Zip: MIAMI, FL 33186

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: CARLOS MARTINEZ

P

03/18/2003

Electronic Signature of Signing Officer or Director

Date