

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000107664

Entity Name: CARIBBEANLINK, INC.

FILED
Apr 18, 2009
Secretary of State

Current Principal Place of Business:

9965 MIRAMAR PARKWAY
#243
MIRAMAR, FL 33025

Current Mailing Address:

9965 MIRAMAR PARKWAY
#243
MIRAMAR, FL 33025

New Principal Place of Business:

7408 W COMMERCIAL BLVD
#243
LAUDERHILL, FL 33319

New Mailing Address:

7408 W COMMERCIAL BLVD
#243
LAUDERHILL, FL 33319

FEI Number: 65-1058144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCALLA, LEON D
9965 MIRAMAR PARKWAY
#243
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

MCCALLA, LEON D
7408 W COMMERCIAL BLVD
#243
LAUDERHILL, FL 33319 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: LEON MCCALLA

04/18/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: MCCALLA, LEON D MR.
Address: 9965 MIRAMAR PARKWAY #243
City-St-Zip: MIRAMAR, FL 33025

Title: D (X) Delete
Name: MCCALLA, LEON D MR.
Address: 9965 MIRAMAR PARKWAY #243
City-St-Zip: MIRAMAR, FL 33025 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: MCCALLA, LEON D MR.
Address: 7408 W COMMERCIAL BLVD #243
City-St-Zip: LAUDERHILL, FL 33319

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

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: LEON MCCALLA

PSTD

04/18/2009

Electronic Signature of Signing Officer or Director

Date