

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000048843

1. Entity Name

CARIBBEAN CUISINE INTERNATIONAL CORP.

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90937 008 ***150.00

Principal Place of Business

9020 SW 81ST AVENUE
MIAMI FL 33156

Mailing Address

9020 SW 81ST AVENUE
MIAMI FL 33156

80057994



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

14361 SW 142 ST.

Suite, Apt. #, etc.

3. Mailing Address

14361 S.W. 142 St.

Suite, Apt. #, etc.

City & State

MIAMI Florida

City & State

MIAMI Florida

4. FEI Number

65-1107058

Applied For

Not Applicable

Zip
33186

Country

USA

Zip
33186

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINEZ, OCTAVIO L ESQ
9020 SW 81ST AVENUE
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name Octavio L. Martinez, Esq.

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

14361 SW 142 ST

City MIAMI FL

FL

Zip Code 33186

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/26/02

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

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

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PTD
NAME MARTINEZ, OCTAVIO L
STREET ADDRESS 9020 SW 81ST AVENUE
CITY-ST-ZIP MIAMI FL 33156 ☐ Delete

TITLE VSD
NAME MARTINEZ, MIGUEL
STREET ADDRESS 9020 SW 81ST AVENUE
CITY-ST-ZIP MIAMI FL 33156 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD
NAME Octavio L. Martinez
STREET ADDRESS 14361 SW 142 ST
CITY-ST-ZIP MIAMI FL 33186 ☒ Change of add. only. ☐ Addition

TITLE VSD
NAME Miguel Martinez
STREET ADDRESS 14361 SW 142 ST
CITY-ST-ZIP MIAMI FL 33186 ☒ Change of add. only. ☐ Addition

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

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

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

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

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:

[Signature] MIGUEL MARTINEZ 3/26/02 (305) 586-9251

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)