2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# P01000069787

Entity Name: CARIBE FIVE, INC.

Current Principal Place of Business:

4195 S.W. 60 PLACE
MIAMI, FL 33155

New Principal Place of Business:

406 SW 1 STREET
FLORIDA CITY, FL 33034

Current Mailing Address:

4195 S.W. 60 PLACE
MIAMI, FL 33155

New Mailing Address:

406 SW 1 STREET
FLORIDA CITY, FL 33034

FEI Number: 65-1138326 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PEREZ, OLINDA
4195 S.W. 60 PLACE
MIAMI, FL 33155 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: PD ( ) Delete
Name: OLINDA, PEREZ
Address: 4195 SW 60 PLACE
City-St-Zip: MIAMI, FL 33155

Title: VPD ( ) Delete
Name: MES, TOMAS
Address: 4195 SW 60 PLACE
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change ( ) Addition
Name: MESA, TOMAS
Address: 406 SW 1 STREET
City-St-Zip: FLORIDA CITY, FL 33034

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: TOMAS MESA PRES 04/25/2005

Electronic Signature of Signing Officer or Director — Date