

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055135

Entity Name: CARIBBEAN LIVING, INC.

FILED
May 11, 2004
Secretary of State

Current Principal Place of Business:

965 NORTH NOB HILL RD.
#220
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

965 NORTH NOB HILL RD.
#220
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 48-1262141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INNERARITY, PETA
21 SNOWY OWL TERRACE
PLANTATION, FL 33324

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PHIPPS, PETA
Address: 965 NORTH NOB HILLS RD
City-St-Zip: PLANTATION, FL 33324

Title: V () Delete
Name: INNERARITY, AVA
Address: 965 NORTH NOB HILL RD
City-St-Zip: PLANTATION, FL 33324

Title: VP () Delete
Name: INNERARITY, PATRICIA
Address: 965 NORTH NOB HILL RD #220
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: INNERARITY, AVA
Address: 965 NORTH NOB HILL RD
City-St-Zip: PLANTATION, FL 33324

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: PETA PHIPPS

PRES

05/11/2004

Electronic Signature of Signing Officer or Director

Date