

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000119668

**FILED**  
**Apr 22, 2009**  
**Secretary of State**

**Entity Name:** CARIBBEAN TRADE & SHIPPING, INC.

**Current Principal Place of Business:**

7245 NE 4TH AVE  
MIAMI, FL 33138

**New Principal Place of Business:**

12184 SW 92 AVE  
MIAMI, FL 33176

**Current Mailing Address:**

7245 NE 4TH AVE  
MIAMI, FL 33138

**New Mailing Address:**

12184 SW 92 AVE  
MIAMI, FL 33176

**FEI Number:** 76-3069455

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BELIARD, PATRICK  
7245 NE 4TH AVE  
MIAMI, FL 33138 US

**Name and Address of New Registered Agent:**

BELIARD, PATRICK  
12184 SW 92 AVE  
MIAMI, FL 33176 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: PATRICK BELIARD

04/22/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BELIARD, PATRICK  
Address: 7245 NE 4TH AVE  
City-St-Zip: MIAMI, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BELIARD, PATRICK  
Address: 12184 SW  
City-St-Zip: MIAMI, FL 33176

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: PATRICK BELIARD

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date