## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000034761

Entity Name: CARIBE METALS, INC.

**FILED** Sep 12, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3004 NW 82ND AVE 1834-B NE MIAMI GARDENS DR. MIAMI, FL 33122

MIAMI, FL 33179

**Current Mailing Address: New Mailing Address:** 

3004 NW 82ND AVE 1834-B NE MIAMI GARDENS DR.

MIAMI, FL 33122 MIAMI, FL 33179

FEI Number: 20-0894749 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ESCAVRIZA, GILBERTO V 3004 NW 82ND AVE MIAMI, FL 33122

VEGA, JOSE 25 SE 2ND AV. SUIT 410 MIAMI, FL 33131

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: JOSE VEGA 09/12/2005

> Electronic Signature of Registered Agent Date

> > Title:

Name:

Address:

PRFS

ESCAURIZA, GILBERTO

MIAMI, FL 33179

1834-B NE MIAMI GARDENS DR.

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

Title: () Delete ESCAVRIZA, GILBERTO V Name: 3004 NW 82ND AVE Address:

City-St-Zip: MIAMI, FL 33122 City-St-Zip:

Title: VΡ (X) Delete Title: () Change () Addition

HONORATO, JAIME J Name: Name: 17150 COLLINS AVE, STE 101-306 Address: Address: SUNNY ISLES BEACH, FL 33160 City-St-Zip: 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: GILBERTO ESCAURIZA **PRES** 09/12/2005