

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114188

FILED  
Jul 11, 2008  
Secretary of State

Entity Name: CARIBBEAN SHOP N SHIP SERVICE INC.

## Current Principal Place of Business:

14655 SHOTGUN ROAD  
DAVIE, FL 33325

## New Principal Place of Business:

## Current Mailing Address:

14655 SHOTGUN ROAD  
DAVIE, FL 33325

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLYDEN, DAPHNE MRS  
8270 NW 36TH STREET  
SUNRISE, FL 33351 US

## Name and Address of New Registered Agent:

BLYDEN, DAPHNE MRS  
14655 SHOTGUN ROAD  
DAVIE, FL 33325 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:

07/11/2008

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: DP ( ) Delete  
Name: BREALEY, JOHN MR  
Address: 14655 SHOTGUN ROAD  
City-St-Zip: DAVIE, FL 33325

Title: DVST ( ) Delete  
Name: HOWELL, JUDITH H MRS  
Address: 14655 SHOTGUN ROAD  
City-St-Zip: DAVIE, FL 33325

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JOHN BREALEY

DP

07/11/2008

Electronic Signature of Signing Officer or Director

Date