2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000124083

City-St-Zip:

MIAMI, FL 33186

Entity Name: CARIBBEAN FOOD AND BEVERAGE DEPOT INC.

FILED Jun 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9064 S.W. 206 STREET MIAMI, FL 33189 **Current Mailing Address: New Mailing Address:** 9064 S.W. 206 STREET MIAMI, FL 33189 FEI Number: 20-1565570 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILFORT, OLGA R 9064 S.W. 206 STREET MIAMI, FL 33189 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition MILFORT, RAYMOND Name: Name: 195 SW 79 COURT Address: Address: City-St-Zip: MIAMI, FL 33144 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MILFORT, OLGA R Name: 195 SW 79 COURT Address: Address: MIAMI, FL 33144 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition VALLES, PIERRE R Name: Name: 13247 SW 144 TERR Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: () Delete Title: () Change () Addition VALLES, MAHALIA A Name: Name: Address: 13247 SW 144 TERR Address:

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.

City-St-Zip:

SIGNATURE: OLGA REGINE MILFORT D 06/09/2007