## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000099639

Entity Name: CARIBBEAN AUTO RENTALS, CORP.

FILED Jan 08, 2009 Secretary of State

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

18938 NW 85 CT 8045 NW 36 ST 532

#3105

MIAMI GARDENS, FL 33015 MIAMI, FL 33166

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

18938 NW 85 CT 8045 NW 36 ST

#3105

MIAMI GARDENS, FL 33015 MIAMI, FL 33166

FEI Number: 20-5331588 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MARTINEZ, FIDEL MARTINEZ, FIDEL 18938 NW 85 CT 6642 NW 173 LN US

#3105 MIAMI, FL 33015 MIAMI GARDENS, FL 33015 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: FIDEL MARTINEZ 01/08/2009

> 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:**

(X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: MARTINEZ, FIDEL MARTINEZ, FIDEL Name: Name: 18938 NW 85 CT #3105 6642 NW 173 LN Address: Address: City-St-Zip: MIAMI GARDENS, FL 33015 City-St-Zip: MIAMI, FL 33015

Title: VD Title: VD () Delete (X) Change ( ) Addition MARTINEZ, ERNESTO Name: MARTINEZ, ERNESTO

Name: 18938 NW 85 CT #3105 6642 NW 173 LN Address: Address: MIAMI GARDENS, FL 33015 MIAMI, FL 33015 City-St-Zip: City-St-Zip:

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

REYES, ORLANDO TREASUR Name: REYES, ORLANDO Name: 3052 SW 148 PLACE 3052 SW 148 PLACE Address Address: City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33185

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: ORLANDO REYES TR 01/08/2009