## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000107192

Address: City-St-Zip:

CORAL GABLES, FL 33134

Entity Name: CARIBBEAN EQUIPMENT SOLUTIONS, INC.

FILED Apr 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 311 BIRD RD CORAL GABLES, FL 33134 **Current Mailing Address: New Mailing Address:** 1550 MADRUGA AVENUE, SUITE 240 135 SAN LORENZO AVENUE CORAL GABLES, FL 33146 SUITE 660 CORAL GABLES, FL 33134 FEI Number: 30-0443740 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: PEDRO, SANTOS PRES. MERCEDES, BUSTO 311 BIRD ROAD 1450 BRICKELL BAY DRIVE CORAL GABLES, FL 33134 US SUITE 2007 MIAMI, FL 33131 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: MERCEDES BUSTO 04/27/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition SANTOS, PEDRO T Name: Name: 311 BIRD RD. Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: Title: () Change () Addition () Delete SANTOS, JUAN T Name: Name: 311 BIRD RD. Address: Address: CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition SANTOS, ROSARIO S Name: Name: 311 BIRD RD 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: ROSARIO S. SANTOS DIR 04/27/2009