2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000129203

14372 SW 40 TERRACE

MIAMI, FL 33175 US

Address: City-St-Zip: FILED Feb 15, 2008 Secretary of State

| Entity Nam | ne: CLUB CA | RIBBEAN NIGHT, INC. | | • | |
|-------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------|---------------------------------------------|----------------------------------------------|--|
| Current Principal Place of Business: | | | New Principal Place | e of Business: | |
| 1771 CORA MIAMI, FL | | | | | |
| Current Mailing Address: | | | New Mailing Addres | ss: | |
| 3122 SW 14 MIAMI, FL 3 | 41 AVENUE 33175 US | | | | |
| FEI Number: | 26-1531781 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address | Name and Address of New Registered Agent: | |
| RUBEN J. PADRON P.A. 10261 SW 72 STREET SUITE 103 MIAMI, FL 33173 US | | | | 3122 SW 141 AVENUE` | |
| The above in the State | | submits this statement for the pu | rpose of changing its register | ed office or registered agent, or both, | |
| SIGNATURE: EVARISTO LEON | | | | 02/15/2008 | |
| Electronic Signature of Registered Agent | | | t | Date | |
| Election Campaign Financing Trust Fund Contribution (). | | | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () LEON, EVARIST 3122 SW 141 A MIAMI, FL 3317 | VENUE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VPS () DIAZ, ELOISA 3122 SW 141 A MIAMI, FL 3317 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | T () LEON, LUIS | Delete | Title: Name: | () Change () Addition | |

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.

Address:

City-St-Zip:

SIGNATURE: EVARISTO LEON P 02/15/2008