2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000042718

Entity Name: CARICOM GLOBAL TRADING INC.

FILED Sep 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10627 LITHIA ESTATES DR LITHIA, FL 33547 **Current Mailing Address: New Mailing Address:** 10627 LITHIA ESTATES DR LITHIA, FL 33547 FEI Number: 26-2533268 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: NICHOLSON, HILTON S. H 10627 LITHIA ESTATES DR LITHIA, FL 33547 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: HILTON S. H. NICHOLSON 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 Title: (X) Change () Addition NICHOLSON, HILTON S.H. NICHOLSON, HILTON S.H. Name: Name: 10627 LITHIA ESTATES DR 10627 LITHIA ESTATES DR Address: Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: LITHIA, FL 33547 Title: (X) Delete Title: () Change () Addition Name: LOREIHE, NIGEL E Name: 10627 LITHIA ESTATES DR Address: Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: Title: () Delete Title: SD () Change () Addition ALLEYNE, LÜKE E Name: Name: 10627 LITHIA ESTATES DR Address: Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: Title: (X) Delete Title: () Change () Addition CHRISTMAS, SUSAN Name: Name: Address: 10627 LITHIA ESTATES DR Address: City-St-Zip: LITHIA, FL 33547 City-St-Zip: Title: Title: () Delete () Change () Addition RODRIGUEZ, WENDY A Name: Name: 10627 LITHIA ESTATES DR Address: Address: City-St-Zip: LITHIA, FL 33547 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: HILTON S. H. NICHOLSON DG 09/29/2009