

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000055923

**FILED**  
**Jan 17, 2011**  
**Secretary of State**

**Entity Name:** CARIBBEAN IMMIGRATION AND TAX SERVICES, INC.

**Current Principal Place of Business:**

8275 WEST 12 AVE  
201  
HIALEAH, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

8275 WEST 12 AVE  
201  
HIALEAH, FL 33014

**New Mailing Address:**

**FEI Number:** 26-2798685

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ACOSTA, MAYROBIS  
1255 WEST 53 ST APT 103  
HIALEAH, FL 33012 US

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

ACOSTA, MAYROBIS  
1255 WEST 53 STREET APT 3  
HIALEAH, FL 33012 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

01/17/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ACOSTA, MAYROBIS  
Address: 8275 WEST 12 AVE SUITE 201  
City-St-Zip: HIALEAH, FL 33014

I hereby 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 all other like empowered.

SIGNATURE: MAYROBIS ACOSTA

P

01/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date