

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P08000088097

FILED
Jul 07, 2009
Secretary of State**Entity Name:** CARIBBEAN SUNSHINE GROCERY, INC.**Current Principal Place of Business:**15103 REDVALE DRIVE
TAMPA, FL 33625**New Principal Place of Business:****Current Mailing Address:**15103 REDVALE DRIVE
TAMPA, FL 33625**New Mailing Address:****FEI Number:** 26-3514936**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RADHACHARAN, VERONICA
15103 REDVALE DRIVE
TAMPA, FL 33625 US**Name and Address of New Registered Agent:**

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

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: RADHACHARAN, VERONICA
Address: 15103 REDVALE DRIVE
City-St-Zip: TAMPA, FL 33625**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** P () Change (X) Addition
Name: RADHACHARAN, KEVIN
Address: 15103 RED VALE DR
City-St-Zip: TAMPA, FL 33625

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: VERONICA RADHACHARAN

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07/07/2009

Electronic Signature of Signing Officer or Director

Date