## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000070089

Apr 12, 2004 Secretary of State

Entity Name: CARIBE FILMS, INC. **Current Principal Place of Business: New Principal Place of Business:** 6505 SW 114 ST MIAMI, FL 33156 US **Current Mailing Address: New Mailing Address:** PO BOX 161923 MIAMI, FL 331161923 US FEI Number: 59-3205036 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: SAVINON, ARTURO J 6505 SW 114 ST MIAMI, FL 33156 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SAVINON, ARTURO J Name: Name: 6505 SW 114 ST Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: Title: VΡ Title: (X) Change ( ) Addition () Delete

Name: SMITH, ROBERT J 3900 N.E. 25 AVE. Address: LIGHTHOUSE POINT, FL 33064 City-St-Zip:

Name: SMITH, ROBERT J Address: 3120 NE 45TH STREET FT. LAUDERDALE, FL 33308 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ARTURO J. SAVINON MR. 04/12/2004