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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000085415 1. Corporation Name

CARIBBEAN AIRWAYS, INC.

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90026 030 ***150.00



	e of Business	Mailing Address							
186 BILBAO ST	REET	186 BILBAO STEET							
	EACH FL 33411	ROYAL PALM BEACH FL 33411				DO NOT WRITE IN THIS SPACE			
US		U\$			<u> </u>	3. Date Incorporated or Qualifed			
					3.	•			Į.
		<u> </u>				12/10/1993 FEI Number		11.	Ameliad For
2. Principal Pi	lace of Business	2a. Mailing Address			*-				Applied For
21		26				<u>65-04628</u> 82			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certifcate of Status Desired			Additional Required
City & State		City & State							
City & State		<u> </u>			6.	Election Campaign Financing Trust Fund Contribution			May Be to Fees
23	Courts:	28 Zip	Соип	itry	— —				3 10 1 003
Zip	Country	— · г		ou y	, a.	 This corporation owes the curre Personal Property Tax. 	-	Magibie	□No
24	9. Name and Address of Current		30		10	. Name and Address of New R		7	
	5. Name and Address of Current	r Keğistelen Ağelir		81 Na			<u></u>		
OPT	a, Barbaro	•	L						
	BILBAO STREET	82 Street Ad			eet Address (F	P.O. Box Number is Not Accepta	ible)		
	AL PALM BEACH FL 33411		<u>}</u>	83					
no i	AL FAUN DEACH E 30411		l'	03					
				84 Cit	у		FL	85 Zij	Code
44 . D	to the provisions of Sections 607.0502	2 and 607 1509 Florida Statuta	e the ah	0.40-035	ned comoratio	on submits this statement for the	purpose of o	hanging i	ts registered
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was au	thorized	by the c	corporation's b	oard of directors. I hereby accep	the appoin	tment as	registered
SIGNATURE		ANOTE:		\t _i	ture required when	reinstating)	DATE	~~~	<u> </u>
12.	Signature, typed or printed name of registered agent		13.	Agent signa	ture required when	ADDITIONS/CHANGES TO OF		D DIRECT	TORS IN 12
TITLE	PTDC	DELETE DELETE	1.1 TITL	F	Т			☐ Change	
NAME	• • • •		17. 7114	_					
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9	ORTA, BARBARO J		1.2 NAM		Ecc				
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STREET ADDRESS CITY-ST-ZIP	186 BILBAO STREET ROYAL PALM BEACH FL	[7] DELETE	1.3 STR	REET ADOR Y-ST-ZIP	ESS			☐ Chang	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE	186 BILBAO STREET ROYAL PALM BEACH FL VD	☐ DELETE	1.3 STR 1.4 CIT 2.1 TITL	REET ADOR Y-ST-ZIP LE	ESS			Change	e Addition
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or one attachment with an address with all other like empowered.