

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000027338
1. Corporation Name

CARIBBEAN BIVES INTERNATIONAL
CORPORATION

Principal Place of Business 3901 SOUTH OCEAN DRIVE SUITE 5W HOLLYWOOD FL 33019	Mailing Address 3901 SOUTH OCEAN DRIVE SUITE 5W HOLLYWOOD FL 33019
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 46 1995	4. FEI Number 65-0572361	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No		

9. Name and Address of Current Registered Agent

BARONOV, ELENA
3901 SOUTH OCEAN DRIVE, SUITE 5W
HOLLYWOOD FL 33019

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature Type: The officer to whom the signature is made is required to sign.

(NOTE: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	DELETE
NAME	DIPISIT
STREET ADDRESS	BARONOV, ELENA
CITY-ST-ZIP	3901 S OCEAN DRIVE HALLANDALE FL 33009
TITLE	DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	DELETE
12 NAME	DIPISIT
13 STREET ADDRESS	BARONOV, ELENA
14 CITY-ST-ZIP	3901 S OCEAN DRIVE HALLANDALE FL 33009
2.1 TITLE	DELETE
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	DELETE
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	DELETE
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	DELETE
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	DELETE
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 in an attachment with an address.

SIGNATURE: ELENA P. BARONOV, PRES
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DATE: MAY 13 1998
DAY: 13
MONTH: 05
YEAR: 98
FEE: 000002522910
-05/14/98--01012--003
***150.00

CR2E034 (10/97)