

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90154 008 ***150.00

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DOCUMENT # P95000029165

1. Corporation Name
CARIBE INVESTMENT, INC.

Principal Place of Business
1330 W. 42ND PLACE
HIALEAH FL 33012

Mailing Address
1330 W. 42ND PLACE
HIALEAH FL 33012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/13/1995

4. FEI Number
65-0582478

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 the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOPEZ, LUIS
1330 W. 42ND PLACE
HIALEAH FL 33012

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME LOPEZ, LUIS
STREET ADDRESS 1330 W. 42ND PLACE
CITY-ST-ZIP HIALEAH FL 33012

☐ DELETE

New Address

TITLE VD
NAME LOPEZ, MIGUEL
STREET ADDRESS 1396 W. 63RD STREET
CITY-ST-ZIP HIALEAH FL 33012

☐ DELETE

New Address

TITLE SD
NAME CANDELARIO, VICTOR H
STREET ADDRESS 11630 W. 57TH COURT
CITY-ST-ZIP HIALEAH FL 33012

☐ DELETE

TITLE TD
NAME VALDES, JOSE A
STREET ADDRESS 573 W. 63RD STREET
CITY-ST-ZIP HIALEAH FL 33012

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE PD
1.2 NAME Lopez Luis.
1.3 STREET ADDRESS 19325 E St Andrew DR
1.4 CITY-ST-ZIP MIAMI-FLA. 33015.

☐ Change ☐ Addition

2.1 TITLE VD
2.2 NAME Lopez Miguel.
2.3 STREET ADDRESS 16521 N.W. 82 Pl.
2.4 CITY-ST-ZIP MIAMI-FLA. 33016

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/99

Date

884-0003

Daytime Phone #

CR2E034 (11/98)