SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ~~OR BEFORE~~ 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000042070 (9)**

1. Corporation Name

CARIBBEAN AREA PROMOTIONS, INC.

Principal Place of Business	Mailing Address
2915 N.W. 33RD PLACE GAINESVILLE FL 32605	2915 N.W. 33RD PLACE GAINESVILLE FL 32605

3. Date Incorporated or Qualified: 05/24/1995
3a. Date of Last Report: N/A
4. FEI Number: 59-3323715 ~~P95000042070 (9)~~ ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 2915 N.W. 33rd Place	26 2915 N.W. 33rd Place
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Gainesville, Florida	28 City & State: Gainesville, Florida
24 Zip: 32605 25 Country: U.S.A.	29 Zip: 32605 30 Country: U.S.A.

9. Name and Address of Current Registered Agent

PARKER, DONOVAN
2915 N.W. 33RD PLACE
GAINESVILLE FL 32605

10. Name and Address of New Registered Agent

81 Name: DONOVAN PARKER
82 Street Address (P.O. Box Number is Not Acceptable): 2915 N.W. 33rd Place
83
84 City: Gainesville FL 85 Zip Code: 32605

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 _____ DATE _____
Signature required for printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chairman, Astley F. Gayle 2027 N.W. 27 Ave. Gainesville, FL 32605 ☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Jerry Tremwell, President 3850 N.W. 36 Place Gainesville, Florida 32606 ☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Donovan Parker, Dir/Sec. 2915 N.W. 33rd Place Gainesville, Florida 32605 ☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Delbert Smith, Dir. RT. 3, Box 204 Lake Butler, Florida 32054 ☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition 700001917547 -08/09/96--01024--021 ***225.00 8/8/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: Donovan Parker, DIRECTOR/SECRETARY, 07/23/96 (352) 375-7129
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0136998 FP

CR2E034 (3/96)