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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000076486 (6)

CARIBE GROUP CORP.

FILED

Feb 16 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address				1 (Abises se incluies bisti abist abist 8841 8610 1881	A BINSU BIRDI FALIR AILI FARI
14260 SW 119TH AVE -25-6-6-2ND AVENUE- MIAMI FL 33186 US		14260 SW 119TH AVE Maimi FL 33186-6023 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
"				10/05/1995	
2. Principal Place of Business 21 14260 5W 119 TH Ave Sulte, Apt #, etc.		2a. Mailing Address		4. FEI Number	Applied For
		26		65-0620743	Not Applicable
		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22		27		b. Cermicate of Status Desired	Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
		28	Country	Trust Fund Contribution	Added to Fees
24 33186 25 29		Zip	- 1 ′	8. This corporation owes or has paid the cur	
9. Name and Address of Current Registered Agent			0	Personal Property Tax due June 30. L 10. Name and Address of New Registered	Yes X No
MARTINEZ, CARLOS E			81 Name	to, 144110 and 144110 or 1141110 gretored	- gon
	180 SW 119TH AVE				
MIAMI FL 33186			82 Street Add	dress (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 (NOTE Registered Agent signature required when reinstating) DATE					
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TATE	P	DETELE	1.1 TITLE		☐ Change ☐ Addition
NAME	MARTINEZ, CARLOS E		1.2 NAME		
STREET ADDRESS	14260 S.W. 119TH AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	Lettere	1.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	2.1 TITLE		Change Addition
NAME	MARTINEZ, RAUL A 14260 SW 119TH AVE		2.2 NAME		
STREET ADDRESS	MIAMI FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VP	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	741104.112.112	Change Addition
NAME	MARTINEZ, EMILIO J		3.2 NAME		Cusings CT Anditrott
STREET ADDRESS	14260 SW 119TH AVE		3 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		34. CITY-ST-ZIP		
TITLE	ST	DELETE	4.1 TITLE		Change Addition
NAME	MARTINEZ, EMILIO F	ļ	4. 2 NAME		
STREET ADDRESS	14260 SW 119THJ AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	ļ	4.4 CITY+ST-ZIP		
TITLE	AS	☐ DELFTE	5.1 TITLE		Change Addition
NAME	Martinez, Fernando I		5.2 NAME		
STREET ADDRESS	14260 SW 119THA VE		5.3 STREET ADDRESS		1
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	artify that the information countries	ith thir time does not small the	6.4 CITY - ST - ZIP	Section 110 07/2Vi) Florido Statutos I further co	dif. No. at the desired

indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

SIGNATURE:

1115/98

(205) 222-107710