Mar 02, 1999 8:00 am Secretary of State

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## 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

## DOCUMENT # P95000076486

| CARIBE  | GROUP CORP.   |                                |  |   |               |  |   |   |
|---|---|--------------------------------|--|---|---------------|--|---|---|
| Principal Place   | e of Business   | Mailing Address                |  |   |               |  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , |
| 14260 SW 119TH AVE 14260 SW 119TH AVE   |   |                                |  |   |               | •  |   | * **                                    |
| MAMI FL 33186 MAIMI FL 33186-6023   |   |                                |  |   |               | DO NOT WRITE IN 1  | HIS SPACE                               |   |
| us us   |   |                                |  |   |               | 3. Date Incorporated or Qualifed                         | TIIS SFACE                              |   |
|   |   |                                |  |   |               | 10/05/1995   | ,                                       |   |
| a Principal Pl  | lace of Business  | 2a. Mailing Address            |  |   |               | 4. FEI Number  | T A                                     | pplied For                              |
| Z, Fillicipai i i   | ace of oddiness   | 26                             |  |   | '             | 65-0620743   | <del></del>                             | ot Applicable                           |
| Suite, Apt.   | #. etc.   | Suite, Apt. #, etc.            |  |   |               |  | \$8.75                                  | Additional                              |
| 22  |   | 27                             |  |   | J             | 5. Certificate of Status Desired                         | Fee R                                   | equired                                 |
| City & State  | e   | City & State                   |  |   |               | 6. Election Campaign Financing                           | \$5.00                                  | May Be                                  |
| 23  |   | 28                             |  |   |               | Trust Fund Contribution                                  | Added                                   | to Fees                                 |
| Zip   | Country   | Zip                            | Cou  | ntry  |               | <ol><li>This corporation owes the current year</li></ol> |   |   |
| 24  | 25  | 29                             | 30   |   |               | Personal Property Tax.                                   | ∐Yes                                    | XN₀                                     |
|   | 9. Name and Address of Curre  | ent Registered Agent           |  | 81 Nam  |               | 10. Name and Address of New Register                     | red Agent                               |   |
| MAD   | TINEZ, CARLOS E   |                                |  | 81 Nam  | ie            |  |   |   |
|   | SO SW 119TH AVE   |                                |  | 82 Stre   | et Addres     | ss (P.O. Box Number is Not Acceptable)                   |   | \                                       |
| MIAMI FL 33186  |   |                                |  | 83  |               |  |   |   |
| intra-  | 1 2 30 100  |                                | ļ  | 83  |               |  |   |   |
|   |   |                                |  | 84 City   |               |  | FL 85 Zip                               | Code                                    |
| D   | to the provisions of Scotions 607.05  | ing and 607 1508 Florida State | itas the at  | nove-nami   | ed cornor     | ation submits this statement for the purpos              | e of changing its                       | s registered                            |
| office or n   | registered agent, or both, in the State<br>of familiar with, and accept the oblig   | e of Florida. Such change was  | autnorized   | i by the co   | rporation     | 's board of directors. I hereby accept the a             | ppointment as re                        | ∌gistered                               |
| SIGNATURE   |   | ,                              | E Basistand  | Agost signat  | ro mauirod l  | when reinstating) DAT                                    | F                                       |   |
|   | Signature, typed or printed name of registered ag   | ND DIRECTORS                   | 13.  | Agent signati   | TE TEQUIFOU . | ADDITIONS/CHANGES TO OFFICER                             |   | ORS IN 12                               |
| TITLE   | P   | DELETE                         | 1,1 TIT  | T.E   |               | 7,55   | ☐ Change                                |   |
| NAME  | MARTINEZ, CARLOS E  |                                | 1.2 NA   | ME  |               |  | -                                       |   |
| STREET ADDRESS  | 14260 S.W. 119TH AVE.   |                                | 1.3 ST   | REET ADDRE  | ss            | • •  | •                                       | 1                                       |
| CITY-ST-ZIP   | MIAMI FL  |                                | 1.4 CF   | TY-ST-ZIP   |               |  | <u> </u>                                |   |
| TITLE   | VP  | ☐ DELETE                       | 2.1 TIT  | ī.E   |               |  | ☐ Change                                | Addition                                |
| NAME  | MARTINEZ, RAUL A  |                                | 2.2 NA   | ME  | 1             |  | •                                       |   |
| STREET ADDRESS  | 14260 SW 119TH AVE  |                                | 23 ST  | REET ADORE  | ss            |  |   |   |
| CITY-ST-ZIP   | MIAMI FL  |                                | 2.4.01   |   |               |  |   |   |
| TITLE   | VP  |                                | 2.70   | TY-ST-ZIP   | - 1           |  |   |   |
| NAME  |   | ☐ DELETE                       | 3.1 TF   |   |               |  | Change                                  | Addition                                |
|   | Martinez, emilio j  | ☐ DELETE                       |  | rle   |               |  | Change                                  | ☐ Addition )                            |
| STREET ADDRESS  | MARTINEZ, EMILIO J<br>14260 SW 119TH AVE  | ☐ DELETE                       | 3.1 TF<br>3.2 NA   | rle   | ss            |  | Change                                  | Addition )                              |
| STREET ADDRESS<br>CITY-ST-ZIP   | 1   |                                | 3.1 TFF<br>3.2 NA<br>3.3 ST  | TLE<br>WE   | ss            |  |   |   |
|   | 14260 SW 119TH AVE  | ☐ DELETE                       | 3.1 TFF<br>3.2 NA<br>3.3 ST  | TLE<br>WAE<br>REET ADDRE<br>ITY-ST-ZIP  | ss            |  | ☐ Change                                |   |
| CITY-ST-ZIP   | 14260 SW 119TH AVE<br>MIAMI FL<br>ST<br>MARTINEZ, EMILIO F  |                                | 3.1 TR<br>3.2 NA<br>3.3 ST<br>3.4. CI  | TLE<br>WAE<br>TREET ADDRE<br>TTY-ST-ZIP<br>TLE  | ss            |  |   |   |
| CITY-ST-ZIP   | 14260 SW 119TH AVE<br>MIAMI FL<br>ST<br>MARTINEZ, EMILIO F<br>14260 SW 119THJ AVE   |                                | 3.1 TR<br>3.2 NA<br>3.3 ST<br>3.4. CI<br>4.1 TR<br>4.2 N   | TLE<br>WAE<br>TREET ADDRE<br>TTY-ST-ZIP<br>TLE  |               |  |   |   |
| CITY-ST-ZIP TITLE NAME  | 14260 SW 119TH AVE<br>MIAMI FL<br>ST<br>MARTINEZ, EMILIO F<br>14260 SW 119THJ AVE<br>MIAMI FL                               | ☐ DELETE                       | 3.1 TFI<br>3.2 NA<br>3.3 ST<br>3.4. CI<br>4.1 TFI<br>4. 2 NA<br>4.3 ST   | ILE  WE  REET ADORE  ITY-ST-ZIP  ILE  AME   |               |  | ☐ Change                                | Addition                                |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS   | 14260 SW 119TH AVE<br>MIAMI FL<br>ST<br>MARTINEZ, EMILIO F<br>14260 SW 119THJ AVE<br>MIAMI FL<br>AS                         |                                | 3.1 TRI<br>3.2 NA<br>3.3 ST<br>3.4. CI<br>4.1 TII<br>4. 2 N<br>4.3 ST<br>4.4 CI<br>5.1 TII   | TLE TREET ADDRE TTY-ST-ZIP TLE AME TREET ADDRE TTY-ST-ZIP TLE   |               |  |   | Addition                                |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                                       | 14260 SW 119TH AVE<br>MIAMI FL<br>ST<br>MARTINEZ, EMILIO F<br>14260 SW 119THJ AVE<br>MIAMI FL<br>AS<br>MARTINEZ, FERNANDO 1 | ☐ DELETE                       | 3.1 TR<br>3.2 NA<br>3.3 ST<br>3.4. CI<br>4.1 TR<br>4. 2 NA<br>4.3 ST<br>4.4 CI<br>5.1 TR<br>5.2 NA   | TLE TREET ADDRE TTY-ST-ZIP TLE AME TY-ST-ZIP TLE TY-ST-ZIP TLE  | ss            |  | ☐ Change                                | Addition                                |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE                                 | 14260 SW 119TH AVE MIAMI FL ST MARTINEZ, EMILIO F 14260 SW 119THJ AVE MIAMI FL AS MARTINEZ, FERNANDO I 14260 SW 119THA VE   | ☐ DELETE                       | 3.1 TFF<br>3.2 NA<br>3.3 ST<br>3.4. CI<br>4.1 TFF<br>4. 2 NA<br>4.3 ST<br>4.4 CFF<br>5.1 TFF<br>5.2 NA<br>5.3 ST                             | ILE  ME  REET ADDRE  ITY-ST-ZIP  ILE  AME  REET ADDRE  IY-ST-ZIP  LE  ME  REET ADDRE  | ss            |  | ☐ Change                                | Addition                                |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | 14260 SW 119TH AVE<br>MIAMI FL<br>ST<br>MARTINEZ, EMILIO F<br>14260 SW 119THJ AVE<br>MIAMI FL<br>AS<br>MARTINEZ, FERNANDO 1 | DELETE                         | 3.1 TIT<br>3.2 NA<br>3.3 ST<br>3.4 CI<br>4.1 TIT<br>4.2 NA<br>4.3 ST<br>4.4 CI<br>5.1 TIT<br>5.2 NA<br>5.3 ST<br>5.4 CI                      | ILE  ME REET ADDRE ITY-ST-ZIP  LE  AME REET ADDRE TY-ST-ZIP  LE  ME TY-ST-ZIP  LE  ME TREET ADDRE TY-ST-ZIP   | ss            |  | ☐ Change                                | Addition Addition                       |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS             | 14260 SW 119TH AVE MIAMI FL ST MARTINEZ, EMILIO F 14260 SW 119THJ AVE MIAMI FL AS MARTINEZ, FERNANDO I 14260 SW 119THA VE   | ☐ DELETE                       | 3.1 TIT<br>3.2 NA<br>3.3 ST<br>3.4 CI<br>4.1 TIT<br>4.2 NA<br>4.3 ST<br>4.4 CI<br>5.1 TIT<br>5.2 NA<br>5.3 ST<br>5.4 CI<br>6.1 TI            | ILE  ME REET ADDRE ITY-ST-ZIP  LE  AME REET ADDRE ITY-ST-ZIP  LE  MME IREET ADDRE ITY-ST-ZIP  ILE | ss            |  | ☐ Change                                | Addition Addition                       |
| CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | 14260 SW 119TH AVE MIAMI FL ST MARTINEZ, EMILIO F 14260 SW 119THJ AVE MIAMI FL AS MARTINEZ, FERNANDO I 14260 SW 119THA VE   | DELETE                         | 3.1 TIT<br>3.2 NA<br>3.3 ST<br>3.4 CI<br>4.1 TIT<br>4.2 NA<br>4.3 ST<br>4.4 CI<br>5.1 TIT<br>5.2 NA<br>5.3 ST<br>5.4 CI<br>6.1 TIT<br>6.2 NA | ILE  ME REET ADDRE ITY-ST-ZIP  LE  AME REET ADDRE ITY-ST-ZIP  LE  MME IREET ADDRE ITY-ST-ZIP  ILE | ss            |  | ☐ Change                                | Addition 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR