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

PROFIT *
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700000841 (1)

NORTH CARIBBEAN ADVENTURES, INC.

FILED May 02 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address						
3500 CLEVELAND STREET HOLLYWOOD FL 33021		3500 CLEVELAND STREET HOLLYWOOD FL 33021-4921						
					Date Incorporated or Qualified 12/30/1996	3a. D	ate of Last F	Report
2. Principal F	2a. Mailing Address	ng Address		4. FEI Number		T A	pplied For	
21		26					lot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	53		Additional
22		[27]						Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	Ш		May Be
23 ZID	Zip Country Zip		Country			vr intennible		
24	25 29 30			ntry 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Currer		1		10 Name and Address of New I	Registered	Agent	
DON	IATO, RICHARD T			Name Re	. Au CHA	Grad		
7700 DAVIE ROAD EXTENSION				B2 Street Address (P.O. Box Number is Not Acceptable)				
HOL	LYWOOD FL 33024				O CLEVELAND	57.		
			1	33				
	•		la la	4 City 1			85 Zip	Code
				Ho	wy Wood	FL	. 3.3	1501
11. Pursuant office or r	to the provisions of Sections 607.850	02 and 607.1508, Florida Stati	utes, the abo	ove-named cor	poration submits his statement for the tion's board of directors. I hereby acc	purpose o	f changing	its registered
agent I a	am familiar with and a cent the oblig	ations of Section 607.0505.	lorida Statu	tes.	mente beard of directors. Thereby doc	A	A. A. I	
SIGNATURE	(((1/92	COUNTY K	p-ph.	E.CH	A-T-TEKSON=	AA	<u> </u>	97
40	Signature, typed or stated name or regist, led ag		 <u> </u>	Agent eignature requ	ired when reinstating) ADDITIONS/CHANGES TO OF	DATE	D DIDECTO	NOC 111 12
12, Tille	D OFFICERS AN	ID DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OF	IUERS AN	Change	
NAME	CHATTERSON, RALPH	Cal Deceir	1.2 NAA	- 1			C. Change	
STREET AODRESS	3500 CLEVELAND STREET			EET ADORESS				
CITY-SE-ZIO	HOLLYWOOD FL 33021			(-ST-ZIP	•			
THE	D	DELETE	2.1 TITL				Change	Addition
NAME	BERRY, RICK	<u> </u>	2.2 NA					
STREET ADDRESS	3500 CLEVELAND STREET			EET ADDRESS				
CITY - S1 - 7IP	HOLLYWOOD FL 33021			Y-ST-ZIP	•			
TILL	D	DELETE	3.1 TITS				Change	Addition
NAME	DONATO, RICHARD T		3.2 NA	AE			•	
STREET ADDRESS	7700 DAVIE RD. EXTENSION			EET ADORESS				
CITY-ST-7IP	HOLLYWOOD FL 33024		I	Y-ST-ZIP				
TITLE	, , , , , , , , , , , , , , , , , , , ,	DELETE	4.1 TITI				Change	Addition
NAME			4 2 NA	ME [
STREET ADDRESS			4 3 STR	EET ADDRESS				
C(1)Y-S1 2(P	Ì		4.4 CIT	Y-ST-ZIP				
THEF		☐ DELETE	5.1 TIT		······································		Change	☐ Addition
NAME			5.2 NA	AE				
STREET ADDRESS			5.3 STR	EET ADDRESS				
CITY - ST - ZIP			5.4 CIT	Y-ST-ZIP				
) if : E		DELETE	6.1 TiTI	.f			Change	Addition
NAME	•		6.2 NAJ	dE				
STREET ADDRESS			6.3 ST	EET ADDRESS				
CHTY - ST - ZIP	<u></u>		6.4 CIT	Y-ST-ZIP				

14. I do 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 teport 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 control on 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 13 of charged, or on an attachment with an address.

SIGNATURE

Apray, 1997 (954) 989