

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90362 048 ***150.00

0160779 AV

DOCUMENT # P97000000841

1. Entity Name
NORTH CARIBBEAN ADVENTURES, INC.



Principal Place of Business
3500 CLEVELAND STREET
HOLLYWOOD FL 33021

Mailing Address
3500 CLEVELAND STREET
HOLLYWOOD FL 33021

2. Principal Place of Business

5101 HOLLYWOOD BLVD
Suite, Apt. #, etc.
49

3. Mailing Address

P.O. Box 6549
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

HOLLYWOOD FL

City & State

HOLLYWOOD FL

4. FEI Number

65-0719645

Applied For

Not Applicable

Zip

33021

Country

BROWARD

Zip

33081

Country

BROWARD

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHATTERSON, RALPH
3500 CLEVELAND ST.
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name

RICHARD BERRY

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

5101 HOLLYWOOD BLVD. # 49

City

HOLLYWOOD

FL

Zip Code

33021

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Richard Berry

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **CHATTERSON, RALPH**
STREET ADDRESS **3500 CLEVELAND STREET**
CITY-ST-ZIP **HOLLYWOOD FL 33021**

TITLE **D** ☐ Delete
NAME **BERRY, RICK**
STREET ADDRESS **3500 CLEVELAND STREET**
CITY-ST-ZIP **HOLLYWOOD FL 33021**

TITLE **D** ☐ Delete
NAME **DONATO, RICHARD T**
STREET ADDRESS **7700 DAVIE RD. EXTENSION**
CITY-ST-ZIP **HOLLYWOOD FL 33024**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Richard Berry

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/03
Date

(954) 987-9444
Daytime Phone #

CR2E034 (10/02)