Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90070 003 ***150.00

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 # P97000100206

 Corporation 							
THE CAR	RIBBEAN AT BOCA BAYOU,	INC.					40:
Principal Place of Business Mailing Address					- 1 186 199 (10 181 160) \$0 11 0¢ 11 04 01	FIRST ORIST AND IN STADIC MARKET AREA TO	101
1401 E. BROWARD BLVD. 1401 E. BROWARD BLVD.							
SUITE 206 SUITE 206 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301			1	DO NOT WRITE IN THIS SPACE			•
FI. DIODENDALE PL 33301			•	3. Date Incorporated or Qualifed		\Box	
					11/25/1997		
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For		
21		26		65-0803835	Not Applica	-	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	ı [
22		27		3. 00.11010	Fee Required		
City & State		City & State		6." Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution	Added to Fees	\dashv
Zip	Country	Zip	Count	iry	8. This corporation owes the current year	ar Intangible ☐ Yes ☐ No	}
24 25		29 29 Accept	30		Personal Property Tax. 10. Name and Address of New Registr		\dashv
 	9. Name and Address of Current	r Kegistered Agent	\{	Name	IV. Name and Address of New Hogist		\neg
KELI	LEY, PATRICK G			<u> </u>			
	E. BROWARD BLVD.		82 Street Add		tress (P.O. Box Number is Not Acceptable)		
SUITE 206			1	33			
FT. LAUDERDALE FL 33301							
			1	34 City		FL 85 Zip Code	
11 Pursuant	to the provisions of Sections 607 0502	2 and 607.1508. Florida Statut	tes, the abo	i ove-named corp	poration submits this statement for the numo	se of changing its registere	;d
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligat	nt Florida. Such change was a	iuthorized l	ov tne corporati	ion's board of directors. I hereby accept the	appointment as registered	
	m ramiliar with, and accept the obligat	lions of, Section 667.0303, Fic	niga Statut	co.	•		ļ
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE	: Registered A	gent signature requir	red when reinstating) DA		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	D	☐ DELETE 1.1 TI		E		☐ Change ☐ Add	ation
NAME	BONVIE, RICHARD E		1.2 NAV	E			
STREET ADDRESS	1401 E. BROWARD BLVD. #200	6	1,3 STR	EET ADORESS			
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		1.4 CITY	- ST-ZIP			dition.
TITLE	D	☐ DELETE 2.1 TI		E		Change Add	HUOH
NAME	BONVIE, RICHARD J		2.2 NAM	E			
STREET ADDRESS	1401 E. BROWARD BLVD. #200	6		EET ADDRESS			ĺ
CITY-ST-ZIP	The state of the s			Y-ST-ZIP		Change Add	dition
TITLE	D	☐ DELETE	3.1 TITL	[Douguage Dayor	
NAME	BONVIE, PATRICIA A		3.2 NAN				
STREET ADDRESS				EET ADDRESS			ļ
CITY-ST-ZIP	FT. LAUDERDALE FL 33301		_	Y-ST-ZIP		Change Add	dition
TITLE			4.1 TITL	t			
NAME			4. 2 NA	EET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP			5,1 TITL	-ST-ZIP		Change Add	dition
TITLE NAME		<u> </u>	5.2 NAN		• ,		
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
TITLE		☐ DELETE	6.1 TITL			☐ Change ☐ Add	dition
NAME			. 6.2 NAM	ie			
STREET ADDRESS			6.3 STR	EET ADDRESS			

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 corpolation 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 or an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

954-772-663)