

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000038032

FILED  
May 01, 2009  
Secretary of State

Entity Name: CARIBBEAN PRINTERS ENTERPRISES INC

## Current Principal Place of Business:

13644 SW 142D AVE., STE. A  
MIAMI, FL 33186

## New Principal Place of Business:

## Current Mailing Address:

13644 SW 142D AVE., STE. A  
MIAMI, FL 33186

## New Mailing Address:

FEI Number: 65-0912217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTIJN, PATRICIA  
13644 SW 142D AVE., STE. A  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: MARTIJN, PATRICIA  
Address: 13644 SW 142ND AVE, STE A  
City-St-Zip: MIAMI, FL 33186

Title: P ( ) Delete  
Name: JONCKHEER, AUGUST A  
Address: 13644 SW 142D AVE., STE. A  
City-St-Zip: MIAMI, FL 33186

Title: S ( ) Delete  
Name: JONCKHEER, GUDELIA  
Address: 13644 SW 142D AVE., STE. A  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA MARTIJN

V

05/01/2009

Electronic Signature of Signing Officer or Director

Date