

2000 UNIFORM BUSINESS REPORT (UBR)

71

FILED
Aug 03, 2000 8:00 am
Secretary of State

07-10-2000 90016 016 ***150.00
 08-03-2000 90001 031 ***400.00

DOCUMENT # P99000051360
Entity Name CARIBIAN TRADING CORP.
 361 S. Redland Road
 Florida City, Fl. 33034

Principal Place of Business **Mailing Address**
 361 S. Redland Road Same Address.-
 Florida City, Fl. 33034

Principal Place of Business **3. Mailing Address**
 361 S. Redland Road 361 S. Redland Road
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
 Florida City, Florida Florida City, Florida
Zip **Country** **Zip** **Country**
 33034 USA 33034 USA

4. FEI Number **Applied For**
 65-0926759 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Orlando Rodriguez
 361 S. Redland Road
 Florida City, Florida

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **Zip Code**

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
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when remitting)

DATE

This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 15, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

OFFICERS AND DIRECTORS

	☐ Delete
President/Director RODRIGUEZ, Orlando 361 S. Redland Road Florida City, Fl. 33034	
STREET ADDRESS ST-ZIP	
STREET ADDRESS ST-ZIP	
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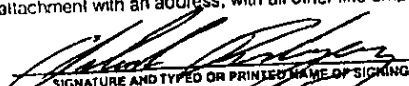
12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III 11

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

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

Orlando Rodriguez
 President/Director 06-21-2000

SIGNATURE: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Phone: 305-247-7045