

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90104 011 ***150.00

DOCUMENT # P99000099514

1. Entity Name
CARIBE RESIDENCES CORP.

Principal Place of Business 900 INGRAHAM BUILDING 25 SOUTH 2ND AVENUE MIAMI FL 33131	Mailing Address 900 INGRAHAM BUILDING 25 SOUTH 2ND AVENUE MIAMI FL 33131-1506
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2. Principal Place of Business 14260 SW 119 Avenue Suite, Apt. #, etc.	3. Mailing Address Same Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Miami, FL	City & State	4. FEI Number 65-0978499	Applied For <input type="checkbox"/> Not Applicable
Zip 33186	Country USA	Zip	Country
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MURAI, WALD, BIONDO & MORENO, P.A. 900 INGRAHAM BUILDING 25 SOUTH 2ND AVENUE MIAMI FL 33131	7. Name and Address of New Registered Agent Name Arnaiz Miren Street Address (P.O. Box Number is Not Acceptable) 14260 SW 119 Avenue City Miami FL Zip Code 33186
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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.

SIGNATURE *Miren Arnaiz* (NOTE: Registered Agent signature required when reinstating) DATE **4/13/00**

9. 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 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, CARLOS E 900 INGRAHAM BUILDING MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14260 SW 119 Ave Miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, RAUL 900 INGRAHAM BUILDING MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14260 SW 119 Ave Miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTINEZ, FERNANDO 900 INGRAHAM BUILDING MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14260 SW 119 Ave Miami, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARNAIZ, MIREN 900 INGRAHAM BUILDING MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14260 SW 119 Ave Miami, FL 33186
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13. 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.

SIGNATURE: *Miren Arnaiz* **4/13/00 (305) 233-6776**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)