

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000099514

FILED
Mar 18, 2003
Secretary of State

Entity Name: CARIBE RESIDENCES CORP.

Current Principal Place of Business:

11755 SW 90 ST.
210
MIAMI, FL 33176 US

Current Mailing Address:

11755 SW 90 ST.
210
MIAMI, FL 33176 US

New Principal Place of Business:

11755 SW 90 STREET
SUITE 210
MIAMI, FL 33186 US

New Mailing Address:

11755 SW 90 STREET
SUITE 210
MIAMI, FL 33186 US

FEI Number: 69-0978499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNAIZ, MIREN
11755 SW 90 ST
SUITE 210
MIAMI, FL 33186

Name and Address of New Registered Agent:

ARNAIZ, MIREN
11755 SW 90 STREET
SUITE 210
MIAMI, FL 33186

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:

03/18/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARTINEZ, CARLOS E
Address: 11755 SW 90TH STREET 210
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: MARTINEZ, RAUL
Address: 11755 SW 90TH STREET 210
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: MARTINEZ, FERNANDO
Address: 11755 SW 90TH STREET 210
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: ARNAIZ, MIREN
Address: 11755 SW 90TH STREET 210
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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MIREN ARNAIZ

D

03/18/2003

Electronic Signature of Signing Officer or Director

Date