2008 FOR PROFIT CORPORATION ANNUAL REPORT			FILED Feb 06, 2008 8:00 am
DOCUMENT # S26606 1. Entity Name CARICAN, INC.			Secretary of State 02-06-2008 90030 017 ***150.00
Principal Place of Business 11966 SW 102 TERR MIAMI, FL 33186 US	Mailing Address 11966 SW 102 TERR MIAMI, FL 33186 US	<u> </u>	· · · · · · · · · · · · · · · · · · ·
DO NOT WRITE	E IN THIS SPA	CE.	02012008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For
6. Name and Address of Curren	t Registered Agent		65-0236918 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
RAMSIUAH, SEUDIAL P 11996 SW 102 TERR SUITE 310 MIAMI, FL 33186	(Agisteren Agau		DO NOT WRITE IN THIS SPACE
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. Familiar with, and accept the obligations of registered agent.			
SIGNATURE		t when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550	9. Election Campaign Fin Trust Fund Contribution		.00 May Be led to Fees
10. OFFICERS AN	DDIRECTORS		
TITLE P NAME RAMSINGH, SEUDIAL			
STREET ADDRESS 11966 SW 102 TERR			
CITY-ST-ZIP MIAMI, FL			
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CITY-ST-ZIP INIDAD WEST INDIES,			
TTLE D	-		
NAME RAMSINGH, TYRON			
CITY-ST-ZIP SAN JUAN TRINIDAD,			
m.e D			IN THIS SPACE
NAME RAMSINGH, RAMESH			
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TILE D			
NAME RAMSINGH, NARINE			
STREET ADDRESS 74 2ND ST			
	····		
NAME RAMSINGH, RAMNARINE	Ξ.		
STREET ADDRESS CORNER 1ST ST & 4TH AVE			
CITY-ST-ZIP BARATARIA TRINIDAD, 12. I hereby certify that the information supplied with this liling does not qualify for the exemptions contained.			t in Chapter 119, Florida Statutes I further certify that the information

Increase of the comportation of the information supplied with this liling does not qualify for the exemptions contained 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 signature shall have the same legal effect as irritable under oath; that I am an officer or director of the comportion or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like previowered.
SIGNATURE:

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