

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001041

Entity Name: BROWARD CARIBBEAN CARNIVAL, INC.

Current Principal Place of Business:

18425 NW 2ND AVE
SUITE 445
MIAMI GARDENS, FL 33169

Current Mailing Address:

18425 NW 2ND AVE
SUITE 445
MIAMI GARDENS, FL 33169 US

FEI Number: 20-2315089

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOHAMMED, RAFIEK
18425 NW 2ND AVE
SUITE 445
MIAMI GARDENS, FL 33169 US

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: RAFIEK MOHAMMED

07/02/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MOHAMMED, RAFIEK
Address 18425 NW 2ND AVE
 SUITE 445
City-State-Zip: MIAMI GARDENS FL 33169

Title VP
Name JOSEPH, ANTHONY
Address 18425 NW 2ND AVE
 SUITE 445
City-State-Zip: MIAMI GARDENS FL 33169

Title TREASURER
Name BECKFORD, JOHN
Address 18425 NW 2ND AVE
 SUITE 445
City-State-Zip: MIAMI GARDENS FL 33169

Title SECRETARY
Name SWASEY, GILDA
Address 18425 NW 2ND AVE
 SUITE 445
City-State-Zip: MIAMI GARDENS FL 33169

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAFIEK MOHAMMED

PRESIDENT

07/02/2020

Electronic Signature of Signing Officer/Director Detail

Date