

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000015472

FILED
Apr 04, 2002 8:00 AM
Secretary of State

Entity Name: CAPITAL ONE DEVELOPMENT CORP.

Current Principal Place of Business:

P.O. BOX 133886
HIALEAH, FL 33013

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 133886
HIALEAH, FL 33013

New Mailing Address:

FEI Number: 65-0980882

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERTI, JORGE
320 EAST 40TH STREET
HIALEAH, FL 33013 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BERTI, SANDRA
Address: P.O. BOX 133886
City-St-Zip: HIALEAH, FL 33013

Title: D () Delete
Name: LUIS, LUGO JOSE
Address: P.O. BOX 133886
City-St-Zip: HIALEAH, FL 330133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SANDRA BERTI

D

04/04/2002

Electronic Signature of Signing Officer or Director

_____ Date