

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048717

Entity Name: CAPAYA PROJECT INC.

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

901 PONCE DE LEON BLVD STE 603
CORAL GABLES, FL 33134

New Principal Place of Business:

4114 CARRIAGE DR
N-3
POMPANO BEACH, FL 33069

Current Mailing Address:

901 PONCE DE LEON BLVD STE 603
CORAL GABLES, FL 33134

New Mailing Address:

4114 CARRIAGE DR
N-3
POMPANO BEACH, FL 33069

FEI Number: 54-2149820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALBORNOZ, WILLIAM H ESQ
901 PONCE DE LEON BLVD STE 603
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

COTTIN, LEOPOLDO
225 N.E. MIZNER BLVD
SUITE 300
BOCA RATON, FL 33432 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: LEOPOLDO COTTIN

04/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COTTIN, LEOPOLDO
Address: 4414 CARRIAGE DRIVE N-3
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: COTTIN, HECTOR A
Address: 1633E VINE ST STE 212
City-St-Zip: KISSIMMEE, FL 34744

Title: D () Delete
Name: COTTIN, FERNANDO
Address: 2618 STARLAKE VIEW DR
City-St-Zip: KISSIMMEE, FL 34747

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:

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: LEOPOLDO COTTIN

D

04/11/2005

Electronic Signature of Signing Officer or Director

Date