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FILED
Jun 08, 2001 8:00 am
Secretary of State

04-19-2001 90313 031 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000039881
1. Entity Name
CAPULET MANAGEMENT, INC.

Principal Place of Business C/O HAROLD J. TURK, ESQ. 1428 BRICKELL AVE., MAIN FLOOR MIAMI FL 33131	Mailing Address C/O HAROLD J. TURK, ESQ. 1428 BRICKELL AVE., MAIN FLOOR MIAMI FL 33131
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2. Principal Place of Business 20 EAST 68" # Suite, Apt. #, etc. 10F	3. Mailing Address 20 EAST 68" # Suite, Apt. #, etc. 10F
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City & State NEW YORK, NY	City & State NEW YORK, NY
Zip 10021	Country USA

4. FEI Number 65-0424110	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**TURK, HAROLD J
1428 BRICKELL AVE.
MAIN FLOOR
MIAMI FL 33131**

7. Name and Address of New Registered Agent
Name
SECRETARY
Street Address (P.O. Box Number is Not Acceptable)
20 EAST 68" # 10F
City
NEW YORK, NY Zip Code
10021

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.
SIGNATURE [Signature] DATE **4.12.01**
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to: Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS

TITLE P	NAME KHAZZAM, SASS E	STREET ADDRESS 4280 GALT OCEAN DRIVE #8F	CITY-ST-ZIP FT. LAUDERDALE FL	☒ Add ☐ Delete
TITLE S	NAME HALLAC, ALBERT	STREET ADDRESS 29 OLD STAGE COACH RD	CITY-ST-ZIP WESTON CT	☒ Add ☐ Delete
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	☐ Add ☐ Delete
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	☐ Add ☐ Delete
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	☐ Add ☐ Delete
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	☐ Add ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SECRETARY	NAME HALLAC, ALBERT	STREET ADDRESS 264 RIVERSIDE	CITY-ST-ZIP WESTON, CT 06883	☐ Change ☐ Addition
TITLE SECRETARY	NAME HALLAC, ALBERT	STREET ADDRESS 27 PHAESANT HILL RD.	CITY-ST-ZIP WESTON, CT 06883	☒ Change ☐ Addition
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	☐ Change ☐ Addition
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE: [Signature] DATE **6.1.01** (212) 734-5915
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

CR2E034 (10/00)