

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000013150

**Entity Name:** CAPASSO ENTERPRISES, INC.

**Current Principal Place of Business:**

528 CAPISTRANO RD  
NOKOMIS, FL 34275

**Current Mailing Address:**

P O BOX 1643  
NOKOMIS, FL 34274-1643 US

**FEI Number:** 65-0642062

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CAPASSO, DAVID  
528 CAPISTRANO RD  
NOKOMIS, FL 34275 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	P	Title	S
Name	CAPASSO, DAVID	Name	CAPASSO, KARIN L
Address	528 CAPISTRANO RD	Address	528 CAPISTRANO RD
City-State-Zip:	NOKOMIS FL 34275	City-State-Zip:	NOKOMIS FL 34275

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

**SIGNATURE:** DAVID CAPASSO

**PRESIDENT**

**04/24/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date