

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 511688

FILED  
Apr 05, 2005  
Secretary of State

Entity Name: CAPRI OF PALM BEACH, INC.

## Current Principal Place of Business:

205 WORTH AVE  
SUITE 315  
PALM BEACH, FL 33480

## New Principal Place of Business:

## Current Mailing Address:

205 WORTH AVE  
SUITE 315  
PALM BEACH, FL 33480

## New Mailing Address:

FEI Number: 59-1703436

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MENDELSON, HYMAN  
205 WORTH AVE., SUITE 315  
PALM BEACH, FL 33480 US

## Name and Address of New Registered Agent:

SHORE, RHONDA  
205 WORTH AVE., SUITE 315  
PALM BEACH, FL 33480 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: RHONDA SHORE

04/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: SHORE, RHONDA  
Address: 6760 PALERMO WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: P ( ) Delete  
Name: MENDELSON, HYMAN  
Address: 1900 CONSULATE PL #2001  
City-St-Zip: W PALM BEACH, FL

Title: VP ( ) Delete  
Name: MENDELSON, FELICIA  
Address: 1900 CONSULATE PL #2001  
City-St-Zip: W PALM BEACH, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SHORE, RHONDA  
Address: 6760 PALERMO WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: VP (X) Change ( ) Addition  
Name: MENDELSON, HYMAN  
Address: 1900 CONSULATE PL #2001  
City-St-Zip: W PALM BEACH, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S/TR ( ) Change (X) Addition  
Name: SHORE, RHONDA  
Address: 6760 PALERMO WAY  
City-St-Zip: LAKE WORTH, FL 33467

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: RHONDA SHORE

PRES

04/05/2005

Electronic Signature of Signing Officer or Director

Date