## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000001267

NEWTON, MA 024641502

City-St-Zip:

Entity Name: CAPEX CAPITAL INC.

FILED Apr 02, 2008 Secretary of State

| Current P   | rincipal Place of Business:   | New Principal Place                         | New Principal Place of Business:   |  |
|---|---|---|--|--|
| 625 RENE LEVESQUE BLVD W MTL CANADA<br>MONTREAL, QUEBEC CANADA<br>MONTREAL, M 00000 |   | MONTREAL, QUEBEC                            | 625 RENE LEVESQUE BLVD W MTL CANADA<br>MONTREAL, QUEBEC CANADA<br>MONTREAL, QC H3B 1R2 |  |
| Current N   | lailing Address:  | New Mailing Address                         | New Mailing Address:   |  |
| 625 RENE LEVESQUE BLVD W MTL CANA<br>MONTREAL, QUEBEC CANADA<br>MONTREAL, M 00000   |   | MONTREAL, QUEBEC                            | 625 RENE LEVESQUE BLVD W MTL CANA<br>MONTREAL, QUEBEC CANADA<br>MONTREAL, QC H3B 1R2   |  |
| FEI Number  | : FEI Number Applied For()  | FEI Number Not Applicable (X)               | Certificate of Status Desired ( )  |  |
| Name and  | Address of Current Registered Agent:  | Name and Address of                         | Name and Address of New Registered Agent:  |  |
| 1270 ORA<br>WINTER F  | ON, WENDY R NGE AVENUE, SUITE D PARK, FL 32789 US named entity submits this statement for the | purpose of changing its registered          | d office or registered agent, or both,   |  |
| SIGNATUI  | RE:   |   |  |  |
| Electronic Signature of Registered Agent  |   | gent  | Date   |  |
| Election Ca   | mpaign Financing Trust Fund Contribution ( ).   |   |  |  |
| OFFICERS AND DIRECTORS:   |   | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | P ( ) Delete<br>RICHER, JACK<br>625 RENE LEVESQUE BLVD. W, SUITE 1700<br>MONTREAL, QUEBEC,    | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition  |  |
| Title:<br>Name:<br>Address:   | ST () Delete<br>CAPLAN, GARY V<br>233 NEEDHAM STREET, STE 300                                 | Title:<br>Name:<br>Address:                 | () Change () Addition  |  |

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GARY V. CAPLAN TRES 04/02/2008