

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90170 041 ***150.00

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1. Entity Name
CAPITOL DEVELOPMENT OF ARKANSAS, INC.



Principal Place of Business
1801 CLINT MOORE RD
#217
BOCA RATON, FL 33487

Mailing Address
1801 CLINT MOORE RD
#217
BOCA RATON, FL 33487

60032784



2. Principal Place of Business - No P.O. Box #
5301 N. Federal Hwy

3. Mailing Address
5301 N. Federal Hwy

Suite, Apt. #, etc.
#380

Suite, Apt. #, etc.
#380

City & State
BOCA RATON, FL

City & State
Boca Raton, FL

Zip
33487

Country

Zip
33487

Country

02272008 Chg-P CR2E034 (12/06)

4. FEI Number
75-2528276

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BLOOM, ASHLEY
1801 CLINT MOORE RD #217
BOCA RATON, FL 33487

7. Name and Address of New Registered Agent

Name
Bloom, HOWARD

Street Address (P.O. Box Number is Not Acceptable)

5301 N. Federal Hwy, #380

City
Boca Raton

FL

Zip Code
33487

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

H. Bloom

03/01/08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPSS
BLOOM, ASHLEY
1801 CLINT MOORE RD #217
BOCA RATON, FL 33487 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BLOOM, HOWARD
1801 CLINT MOORE RD #217
BOCA RATON, FL 33487 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPSS
Ashley Bloom
5301 N. Federal Hwy #380
Boca Raton FL-33487 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Howard Bloom
5301 N. Federal Hwy #380
Boca Raton FL-33487 ☒ 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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

H. Bloom

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/01/08

Date

(561) 674-0060

Daytime Phone #