

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004279

FILED
Apr 30, 2007
Secretary of State

Entity Name: AMERICAN CAPITAL PROPERTY INVESTMENT CORPORATION

Current Principal Place of Business:

440 LOS ALTOS ROAD
PALM SPRINGS, FL 33461

New Principal Place of Business:

10108 COBBLESTONE CREEK DRIVE
BOYNTON BEACH, FL 33437

Current Mailing Address:

440 LOS ALTOS ROAD
PALM SPRINGS, FL 33461

New Mailing Address:

10108 COBBLESTONE CREEK DRIVE
BOYNTON BEACH, FL 33437

FEI Number: 55-0801134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIKELY, AHMED
440 LOS ALTOS ROAD
PALM SPRINGS, FL 33461 US

Name and Address of New Registered Agent:

SHIKELY, AHMED
10108 COBBLESTONE CREEK DRIVE
BOYNTON BEACH, FL 33437 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:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: SHIKELY, AHMED
Address: 440 LOS ALTOS ROAD
City-St-Zip: PALM SPRINGS, FL 33461

Title: VCST () Delete
Name: AHMED, SHAZIA
Address: 440 LOS ALTOS ROAD
City-St-Zip: PALM SPRINGS, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPD (X) Change () Addition
Name: SHIKELY, AHMED
Address: 10108 COBBLESTONE CREEK DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VCST (X) Change () Addition
Name: AHMED, SHAZIA
Address: 10108 COBBLESTONE CREEK DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437

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: AHMED SHIKELY

C

04/30/2007

Electronic Signature of Signing Officer or Director

Date