

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004708

FILED  
Jul 07, 2009  
Secretary of State

Entity Name: CAPSTONE INVESTMENTS OF CALIFORNIA, INCORPORATED

**Current Principal Place of Business:**

12760 HIGH BLUFF DRIVE, SUITE 120  
SAN DIEGO, CA 92130

**New Principal Place of Business:**

**Current Mailing Address:**

12760 HIGH BLUFF DRIVE, SUITE 120  
SAN DIEGO, CA 92130

**New Mailing Address:**

FEI Number: 33-0712338

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SINE, BARRY  
4201 COLLINS AVE  
SUITE 402  
MIAMI BEACH, FL 33140 US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CCEO ( ) Delete  
Name: CAPOZZA, ANTHONY  
Address: 12760 HIGH BLUFF DRIVE, SUITE 120  
City-St-Zip: SAN DIEGO, CA 92130

Title: D ( ) Delete  
Name: DIAMOND, LAWRENCE  
Address: 12760 HIGH BLUFF DRIVE, SUITE 120  
City-St-Zip: SAN DIEGO, CA 92130

Title: D ( ) Delete  
Name: DAHLE, SCOTT  
Address: 12760 HIGH BLUFF DRIVE, SUITE 120  
City-St-Zip: SAN DIEGO, CA 92130

Title: P ( ) Delete  
Name: CAPOZZA, STEVEN  
Address: 12760 HIGH BLUFF DRIVE, SUITE 120  
City-St-Zip: SAN DIEGO, CA 92130

Title: ST ( ) Delete  
Name: CAPOZZA, ANN  
Address: 12760 HIGH BLUFF DRIVE, SUITE 120  
City-St-Zip: SAN DIEGO, CA 92130

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: STEVEN CAPOZZA

P

07/07/2009

Electronic Signature of Signing Officer or Director

Date