FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001822 (3)

CAPS R US, INC.

<u></u>								
Principal Place of Business Mailing Address							(1001)01 (((4 181)0 0)(() 001() 001() 001() 001() 001() 001() 001() 001()	
380 S. COUNT PALM BEACH		380 S. COUNTY RD PALM BEACH FL 33480-4441						
							3. Date Incorporated or Qualified Sa. Date of Last Report 04/09/1996	
2. Principa: P	lace of Business	2a. Mailin	ng Address				4. FEI Number Applied Fo	·····
21		26					NOT APPLICABLE Not Applic	
Suite, Apt	#, etc	Suite,	Apt. #, etc.				5 Contificate of Status Desired \$8.75 Additions	ıl
22		27					Fee Required	
City & State	e	, , , , , , , , , , , , , , , , , , ,	& State				6. Election Campaign Financing \$5.00 May Be	
23		28		7			Trust Fund Contribution Added to Fees	
Zip			Zip Co.		ıtry		8. This corporation has liability for intangible tax under s. 199.032	≥,
24	25 25 9. Name and Address of Current Reg		stered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent	
D. 0		om modiatorou i	- Agoin		81	Name	10. Haine and Address of from Hagisters Agent	
	NDEAU, GUY ESQ							
	WORTH AVE, SUITE 310 M BEACH FL 33480				82	Street Add	Idress (P.O. Box Number is Not Acceptable)	
PAL	M DEACH PL 33400			l'i	83			
					64	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607 05	02 and 607.150	8, Florida Statu	ites, the ab	ove	-named cor		red
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Suc igations of Secti	th change was on 607 0505. F	authorized Iorida Statu	l by ites	the corpora	orporation submits this statement for the purpose of changing its register ration's board of directors. I hereby accept the appointment as register	ĕÖ
1		g						
SIGNATURE	Signature, typica or printed frame of registered a	gent and title if applica	ible. (NO	TE Registered	Age	int signature requ	quired when reinstating) DATE	
12.		ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
THLE	CPST		X DELETE	1.1 TITL		C	Change M Ado	iition
NAME	TREMAIN, WARREN			1.2 NAN		P	LAN TREMAIN	
STREET ADDRESS	380 S. COUNTY RD			1		ADDRESS 3	380 South County Road	
CHY-ST-7IP	PALM BEACH FL 33480	···	BZ beiere	1.4 CIT	···	T-ZIP	Halm Beach FL. 38480	Pro
THILE	D D		DELETE	2.1 (1)			Change Add	dilion
NAME	HORIE, NORIKO			2.2 NAM				
STREET ADORESS	380 S. COUNTY RD PALM BEACH FL 33480			1		ADDRESS		
CITY-ST-ZIP TITLE	FALM BEACH FL 33480		DELETE	2. 4 CIT 3.1 TITL		31 - ZIP	Change Add	lition
HAME			Lad OCCUPA	3 2 NAM				Dell
STREET ADDRESS						ADDRESS		
CITY - ST - 71º				3.4. GIT		1	'	
THLE			DELETE	4.1 7171			Change Ado	dition
NAME !				4, 2 NA	ME			
STREET ADDRESS				4.3 STR	REET	ADDRESS	·	
CiTY - S1 - ZiP				4.4 CIT	Y - S	T-21P		
THILE			DELETE	5.1 TITL			Change Add	Jition
NAME				5.2 NAM	ME			
STREET ACCRESS				5.3 STR	REET	ADDRESS		
C(1) Y - 51 - 2/F				5.4 CIT	Y-S	ıT-ZIP		
THLE			DELETE	6,1 TITU	LE		Change Add	lition
NAME				6.2 NAM	WE			
STREET ADDRESS		ムレ	')	6.3 STR	REET	ADDRESS		
011V_S1.3/P		///__\	1	6 a CIT	v. e	T - 71P		

SIGNATURE:

14. I do hereby certify that the information supplied information indicated on this annual report of su I am an officer or director of the corporation of appears in Block 12 or Block 13 if changed, info

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar. 10 1997 561 835 9500

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the hual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name ent with an address.

FILED

Apr 16 1997 8:00am

Secretary of State

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