2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004360

Entity Name: CAPEWELL HORSENAILS, INC.

FILED Mar 16, 2004 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	14TH STREET A, FL 33180	US			
Current Mailing Address:			New Maili	New Mailing Address:	
1404 BLUE HILLS AVENUE P.O. BOX 7315 BLOOMFIELD, CT 06002 US					
FEI Number:	06-1140052	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:					
	Electronic	Signature of Registered Agent	t	Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ZBAR, DIEGO H	celete CHENES, CH-1009 PULLY	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ZBAR, DIEGO H 6 CHEMIN DES CHENES, CH-1009 PULLY PULLY, SW	
Title: Name: Address: City-St-Zip:	VDC () E MUSTAD, CHRIS 3778 SCHONNIE SWITZERLAND,	D	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () D PILARSKI, CLIFF EN PRAZ POURF 1070 PUIDOUX, S	RY	Title: Name: Address: City-St-Zip:	T (X) Change () Addition PILARSKI, CLIFFORD W EN PRAZ POURRY 1070 PUIDOUX, SW	
Title: Name: Address: City-St-Zip:	MUSTAD, OLE EA PAILACURA	Delete LOS ARGENTINA, AR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C CARLOS, XIFRA 11005 57TH AVE PLYMOUTH, MN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PTD () D LARA, CARLOS 57 HARRIS RD AVON, CT 06001	elete	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition LARA, CARLOS 57 HARRIS RD AVON, CT 06001	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT KASETA S 03/16/2004

ROBERT KASETA, SECRETARY 89 WHITE OAK DRIVE HARWINTON, CT 06791