

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000004360

FILED
Apr 30, 2003
Secretary of State

Entity Name: CAPEWELL HORSENAILS, INC.

Current Principal Place of Business:

1001 BRICKELL BAY DR
SUITE 2104
MIAMI, FL 33131 US

New Principal Place of Business:

3723 N.E. 214TH STREET
AVENTURA, FL 33180 US

Current Mailing Address:

1404 BLUE HILLS AVENUE
P.O. BOX 7315
BLOOMFIELD, CT 06002 US

New Mailing Address:

FEI Number: 06-1140052 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZBAR, DIEGO H
Address: 6 CHEMIN DES CHENES, CH-1009 PULLY
City-St-Zip: PULLY, SW

Title: VDC () Delete
Name: MUSTAD, CHRISTIAN
Address: 3778 SCHONNIED
City-St-Zip: SWITZERLAND,

Title: S () Delete
Name: PILARSKI, CLIFFORD W
Address: 109 NORTH ST.
City-St-Zip: WOLCOTT, CT 06176

Title: D () Delete
Name: MUSTAD, OLE
Address: EA PAILACURA
City-St-Zip: SAN MASTIN DE LOS ARGENTINA,

Title: D () Delete
Name: CARLOS, XIFRA
Address: 11005 57TH AVENUE NORTH
City-St-Zip: PLYMOUTH, MN 55442

Title: PTD () Delete
Name: LARA, CARLOS
Address: 57 HARRIS RD
City-St-Zip: AVON, CT 06001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: ZBAR, DIEGO H
Address: 6 CHEMIN DES CHENES, CH-1009 PULLY
City-St-Zip: PULLY, SW

Title: VDC (X) Change () Addition
Name: MUSTAD, CHRISTIAN
Address: 3778 SCHONNIED
City-St-Zip: SWITZERLAND, SW

Title: S (X) Change () Addition
Name: PILARSKI, CLIFFORD W
Address: EN PRAZ POURRY
City-St-Zip: 1070 PUIDOUX, SW

Title: VD (X) Change () Addition
Name: MUSTAD, OLE
Address: EA PAILACURA
City-St-Zip: SAN MASTIN DE LOS ARGENTINA, AR

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 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: LARA CARLOS

P

04/30/2003

Electronic Signature of Signing Officer or Director

Date

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