

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K87841

FILED
Jul 19, 2005
Secretary of State

Entity Name: CAPITAL DEVELOPMENT INTERNATIONAL OF FLORIDA, INC.

Current Principal Place of Business:

5333 COLLINS AVE
PENTHOUSE 7
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

2300 W SAMPLE RD
SUITE 202
POMPANO BEACH, FL 33073 US

Current Mailing Address:

PO BOX 11310
FT. LAUDERDALE, FL 33339 US

New Mailing Address:

FEI Number: 65-0119365 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CHANDROSS, MICHAEL G
2300 W SAMPLE RD
POMPANO BEACH, FL 33073 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: PD () Delete
Name: JONES, VICKIE L
Address: 5333 COLLINS AVE PH7
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: JONES, VICKIE L
Address: 510 E BELVILLE RD
City-St-Zip: PAHRUMP, NV 89048

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: VICKIE JONES

P

07/19/2005

Electronic Signature of Signing Officer or Director

Date