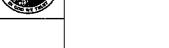
2006 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT DOCUMENT # L04000056921 1. Entity Name CAP ASSET MANAGEMENT LLC Principal Place of Business Mailing Address 1726 7TH AVE SUITE 22 1726 7TH AVE SUITE 22 **TAMPA, FL 33605 TAMPA, FL 33605**

FILED Feb 08, 2006 8:00 am **Secretary of State**

02-08-2006 90088 036 ****50.00





01122006 No Chg-LLC

CR2E083 (11/05)

8118-180-218

Davtime Phone #

4.	FEI Number		Applied For
	55-0876770		Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

CAPORALE, MARCO ALESSANDRO 1726 7TH AVE SUITE 22 TAMPA, FL 33605

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE		
	ling Fee is \$50.00 ue by May 1, 2006				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS	MGRM CAPORALE, MARCO ALESSAND 619 VALLEY HILL DRIVE				
CITY-ST-ZIP	BRANDON, FL 33510				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WI	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SP	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					

Marco Caporale ME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE