

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
 Sandra B. Morham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # L68776 (8)

1. Corporation Name

CAPITAL TECHNIQUES, INC.

FILED
95 JUL 14 AM 11:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

**% HENRY H. NITZBERG
 3330 BAYOU SOUND
 LONGBOAT KEY FL 34228**

Mailing Address

**% HENRY H. NITZBERG
 3330 BAYOU SOUND
 LONGBOAT KEY FL 34228**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/26/1990

3a. Date of Last Report

02/10/1994

4. FEI Number

11-2445899

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
 Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**NITZBERG, HENRY H.
 3330 BAYOU SOUND
 LONGBOAT KEY FL 34228**

10. Name and Address of New Registered Agent

81 Name

SHEILA NITZBERG

82 Street Address (P.O. Box Number is Not Acceptable)

3330 BAYOU SOUND

83

LONGBOAT KEY, FL.

84 City

FL

85 Zip Code

34228

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Sheila Nitzberg **SHEILA NITZBERG**

(NOTE: Registered Agent signature required when reappointing)

DATE

June 19, 1995

12. OFFICERS AND DIRECTORS

TITLE **D**
 NAME **NITZBERG, HENRY H.**
 STREET ADDRESS **3330 BAYOU SOUND**
 CITY - ST - ZIP **LONGBOAT KEY FL**

TITLE **P**
 NAME **NITZBERG, SHEILA**
 STREET ADDRESS **3330 BAYOU SOUND**
 CITY - ST - ZIP **LONGBOAT KEY FL**

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P/D** ☒ Change ☐ Addition
 1.2 NAME **SHEILA NITZBERG**
 1.3 STREET ADDRESS **3330 BAYOU SOUND**
 1.4 CITY - ST - ZIP **LONGBOAT KEY, FL. 34228**

2.1 TITLE
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY - ST - ZIP ☐ Change ☐ Addition

3.1 TITLE
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY - ST - ZIP ☐ Change ☐ Addition

4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY - ST - ZIP ☐ Change ☐ Addition

5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY - ST - ZIP ☐ Change ☐ Addition

6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY - ST - ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, unchanged, or on an attachment with an address.

SIGNATURE:

Sheila Nitzberg

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

June 19, 1995 - 819-393-1368