
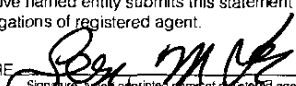
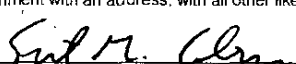


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2004 8:00 am
Secretary of State

04-08-2004 90036 004 ***158.75

DOCUMENT # M33634 1. Entity Name FLORIDA CAPITAL CORPORATION					
Principal Place of Business C/O GEORGE M. IRVINE, JR. 2955 W. STATE ROAD #84 FT. LAUDERDALE, FL 33312			Mailing Address C/O GEORGE M. IRVINE, JR. 2955 W. STATE ROAD #84 FT. LAUDERDALE, FL 33312		
2. Principal Place of Business 2965 W. STATE ROAD 84 Suite, Apt. #, etc.		3. Mailing Address 2965 W. STATE ROAD 84 Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2683045	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent IRVINE, GEORGE M. JR. 2865 W STATE ROAD 84 #84 FT LAUDERDALE, FL 33312				7. Name and Address of New Registered Agent Name GEORGE M. IRVINE III Street Address (P.O. Box Number is Not Acceptable) 2965 W. STATE ROAD 84 City FT. LAUDERDALE FL Zip Code 33312	
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  GEORGE M. IRVINE III PRES. 4-6-04 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC IRVINE, GEORGE M. JR. 2955 W. STATE RD. #84 FT. LAUDERDALE, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COLLER, SCOT A 2965 W STATE RD 84 FT. LAUDERDALE, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S IRVINE, JOAN M. 2965 W. STATE RD. #84 FT. LAUDERDALE, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT GEORGE M. IRVINE III 2965 W. STATE ROAD 84 FT. LAUDERDALE, FL 33312	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  SCOT M. COLLIER 4-6-04 954-587-8400 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					