2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2007
Secretary of State

DOCUMENT# P01000115157

Entity Name: CAPRICORN MOON ENTERPRISES, INC.

Current Principal Place of Business:

815 NE 28TH ST., #207
WILTON MANORS, FL 33334

New Principal Place of Business:

Current Mailing Address:

815 NE 28TH ST., #207
WILTON MANORS, FL 33334

New Mailing Address:

FEI Number: 26-0010067 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COX, JANINE E
815 NE 28TH ST., #207
WILTON MANORS, FL 33334 US

Name and Address of New Registered Agent:

COX-GORDON, JANINE E
815 NE 28TH ST., #207
WILTON MANORS, FL 33334 US

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: JANINE E. COX-GORDON 04/07/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: COX, JANINE E
Address: 815 NE 28TH ST., #207
City-St-Zip: WILTON MANORS, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: COX-GORDON, JANINE E
Address: 815 NE 28TH ST., #207
City-St-Zip: WILTON MANORS, FL 33334

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JANINE E. COX-GORDON PRES 04/07/2007
Electronic Signature of Signing Officer or Director Date