

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000030519

1. Entity Name
CAPIALI U.S.A., INC.



**FILED
Feb 07, 2005 8:00 am
Secretary of State**

02-07-2005 90062 033 ***150.00

Principal Place of Business
1900 E ROBINSON ST
ORLANDO, FL 32803

Mailing Address
1900 E ROBINSON ST
ORLANDO, FL 32803

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SPENCER, STEVEN A
1900 E ROBINSON ST
ORLANDO, FL 32803

01052005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3503380	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

**9. Election Campaign Financing
Trust Fund Contribution**

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	UMPIERRE, GILBERTO J III
STREET ADDRESS	1900 E ROBINSON ST
CITY-ST-ZIP	Miami, FL 33014

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 facer 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:

Gilberto J. Umpierre III

Date

1/2/05

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

786-326-8383