2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2009
Secretary of State

DOCUMENT# P02000110454

Entity Name: CAPONE ENTERPRISE, INC.

Current Principal Place of Business:

5841 N.W. 17 AVE.
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

5841 N.W. 17 AVE.
MIAMI, FL 33142

New Mailing Address:

5841 N.W. 17TH AVE
MIAMI, FL 33142

FEI Number: 52-2382914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HIBBERT, LORAINE
2941 NW 132ND TERR
OPA LOCKA, FL, FL 33054 US

Name and Address of New Registered Agent:

HIBBERT, LORAINE
5841 N.W. 17TH AVE
MIAMI, FL 33142 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: LORAINE HIBBERT 05/23/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: NELSON, ALBERT JR.
Address: 2941 NW 132ND TERR.
City-St-Zip: OPA LOCKA, FL 33054

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: NELSON, ALBERT JR.
Address: 5841 N.W. 17TH AVE
City-St-Zip: MIAMI, FL 33142

Title: P ( ) Change (X) Addition
Name: NELSON, AALIYAH
Address: 5841 N.W. 17TH AVE
City-St-Zip: MIAMI, FL 33142

Title: S,T ( ) Change (X) Addition
Name: HIBBERT, LORAINE
Address: 5841 N.W. 17TH AVE
City-St-Zip: MIAMI, FL 33142

I hereby certify that the information supplied with this filing does not qualify 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: ALBERT NELSON D 05/23/2009
Electronic Signature of Signing Officer or Director Date