2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000025691

Entity Name: CAPIBROS, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
999 PONCE DE LEON BLVD 1045 CORAL GABLES, FL 33134	14411 COMMERCE WAY SUITE 310 MIAMI LAKES, FL 33016

Current Mailing Address:	**New Mailing Address:**
999 PONCE DE LEON BLVD 1045 CORAL GABLES, FL 33134	14411 COMMERCE WAY SUITE 310 MIAMI LAKES, FL 33016

FEI Number: 20-0234958   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
OCARIZ, HIRAM CPA C/O 999 PONCE DE LEON BLVD. 1045 CORAL GABLES, FL 33134 US	STEFANELLI AND BATALLA CPA PA 14411 COMMERCE WAY SUITE 310 MIAMI LAKES, FL 33016 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: MARIA T. BATALLA   05/10/2011
_____   _____
Electronic Signature of Registered Agent   Date

OFFICERS AND DIRECTORS:

Title: DP
Name: CASTILLO, EDUARDO H
Address: 14411 COMMERCE WAY, SUITE 310
City-St-Zip: MIAMI LAKES, FL 33016

Title: DV
Name: CASTILLO, FANNY P
Address: 14411 COMMERCE WAY, SUITE 310
City-St-Zip: MIAMI LAKES, FL 33016

Title: DS
Name: PIANA, ROXANA C
Address: 14411 COMMERCE WAY, SUITE 310
City-St-Zip: MIAMI LAKES, FL 33016

Title: DS
Name: CASTILLO, JUAN P
Address: 14411 COMMERCE WAY, SUITE 310
City-St-Zip: MIAMI LAKES, FL 33016

I hereby 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 all other like empowered.

SIGNATURE: EDUARDO CASTILLO   DP   05/10/2011
_____   _____
Electronic Signature of Signing Officer or Director   Date