

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000049052

Entity Name: RISK CAPITAL FUTURES & OPTIONS, INC.

FILED  
Jan 13, 2005  
Secretary of State

## Current Principal Place of Business:

1592 SHORELINE WAY  
HOLLYWOOD, FL 33019

## New Principal Place of Business:

4000 HOLLYWOOD BLVD  
SUITE 370-N  
HOLLYWOOD, FL 33021

## Current Mailing Address:

1592 SHORELINE WAY  
HOLLYWOOD, FL 33019

## New Mailing Address:

4000 HOLLYWOOD BLVD  
SUITE 370-N  
HOLLYWOOD, FL 33021

FEI Number: 04-3756834

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LA BRUCE, MICHELE  
4000 HOLLYWOOD BLVD STE 525-S  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

LABRUCE, MICHELE  
4000 HOLLYWOOD BLVD  
SUITE 370-N  
HOLLYWOOD, FL 33021 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: MICHELE LABRUCE

01/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LA BRUCE, MICHELE  
Address: 4000 HOLLYWOOD BLVD STE 525-S  
City-St-Zip: HOLLYWOOD, FL 33021

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LABRUCE, MICHELE  
Address: 4000 HOLLYWOOD BLVD STE 370-N  
City-St-Zip: HOLLYWOOD, FL 33021

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHELE LABRUCE

PD

01/13/2005

Electronic Signature of Signing Officer or Director

Date