

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000090165

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: CAPOTE VIDEO PRODUCTIONS, INC.

## Current Principal Place of Business:

1630 SW 1 AVE STE 7A  
MIAMI, FL 33129

## New Principal Place of Business:

1630 SW 1 AVE  
SUITE 7A  
MIAMI, FL 33129

## Current Mailing Address:

1630 SW 1 AVE STE 7A  
MIAMI, FL 33129

## New Mailing Address:

1630 SW 1 AVE  
SUITE 7A  
MIAMI, FL 33129

FEI Number: 14-1893317

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAPOTE, JUAN M  
1630 SW 1 AVE STE 7A  
MIAMI, FL 33129

## Name and Address of New Registered Agent:

CAPOTE, JUAN M  
1630 SW 1 AVE  
7A  
MIAMI, FL 33129

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: JUAN M. CAPOTE

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CAPOTE, JUAM M  
Address: 1630 SW 1 AVE STE 7A  
City-St-Zip: MIAMI, FL 33129

Title: D ( ) Delete  
Name: CAPOTE, EUGENE  
Address: 10119 BOYNTON PL CIR  
City-St-Zip: BOYNTON BCH, FL 33437

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CAPOTE, JUAN M  
Address: 1630 SW 1 AVE STE 7A  
City-St-Zip: MIAMI, FL 33129

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUAN M. CAPOTE

D

04/19/2004

Electronic Signature of Signing Officer or Director

Date