2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# P03000096359

Entity Name: CAPITAL GROWTH INVESTMENTS, INC.

Current Principal Place of Business:

6299 W SUNRISE BLVD #207/209
SUNRISE, FL 33313

New Principal Place of Business:

P.O.BOX 15337
PLANTATION, FL 33318

Current Mailing Address:

P.O. BOX 15337
PLANTATION, FL 33318

New Mailing Address:

FEI Number: 20-0195883 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCKENZIE, ALDENE A
1991 NW 74TH AVE
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MCKENZIE, ALDENE A
Address: P.O. BOX 15337
City-St-Zip: PLANTATION, FL 33318

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D ( ) Change (X) Addition
Name: MCCLYMONT, WILBERN E
Address: P.O. BOX 15337
City-St-Zip: PLANTATION, FL 33318

Title: S ( ) Change (X) Addition
Name: MCKENZIE, MARION P
Address: P.O. BOX 15337
City-St-Zip: PLANTATION, FL 33318

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: ALDENE A MCKENZIE P 04/30/2005

Electronic Signature of Signing Officer or Director Date