

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070705

Entity Name: CAPITAL ORIGINS, INC.

FILED
Mar 04, 2005
Secretary of State

Current Principal Place of Business:

1101 BRICKELL AVENUE
SUITE 702 SOUTH
MIAMI, FL 33131

New Principal Place of Business:

3225 AVIATION AVENUE
SUITE 303
MIAMI, FL 33133

Current Mailing Address:

1101 BRICKELL AVENUE
SUITE 702 SOUTH
MIAMI, FL 33131

New Mailing Address:

3225 AVIATION AVENUE
SUITE 303
MIAMI, FL 33133

FEI Number: 13-4280772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FUENTES, MILTON
1101 BRICKELL AVENUE
SUITE 702 SOUTH
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

FUENTES, MILTON
3225 AVIATION AVENUE
SUITE 303
MIAMI, FL 33133 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: MILTON FUENTES

03/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: FUENTES, MILTON
Address: 1101 BRICKELL AVENUE, SUITE 702 SOUTH
City-St-Zip: MIAMI, FL 33131

Title: VS (X) Delete
Name: CUBAS, ALEXANDER G
Address: 1101 BRICKELL AVENUE, SUITE 702 SOUTH
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: FUENTES, MILTON
Address: 3225 AVIATION AVENUE, SUITE 303
City-St-Zip: MIAMI, FL 33133

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: MILTON FUENTES

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03/04/2005

Electronic Signature of Signing Officer or Director

Date