2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000083362

Entity Name: CAPPONI, DALMATIA BOTTLING CO, INC.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4775 COLLINS AVE 1620 WEST 21ST STREET 2103 MIAMI BEACH, FL 33140

MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

4775 COLLINS AVE 1531 DAYTONIA RD 2103 MIAMI BEACH, FL 33141

2103 MIAMI BEACH, FL 33140

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAPPONI, MICHAEL
4775 COLLINS AVE
2103

CAPPONI, MICHAEL
1620 WEST 21ST STREET
MIAMI BEACH, FL 33140 US

MIAMI BEACH, FL 33140 US MIAMI BEACH, FL 33140 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: 04/29/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P,S
 () Delete
 Title:
 P,S
 (X) Change () Addition

 Name:
 CAPPONI, MICHAEL
 Name:
 CAPPONI, MICHAEL

 Address:
 4775 COLLINS AVE #2103
 Address:
 1620 WEST 21ST STREET

 Address:
 4775 COLLINS AVE #2103
 Address:
 1620 WEST 21ST STREET

 City-St-Zip:
 MIAMI BEACH, FL 33140
 City-St-Zip:
 MIAMI BEACH, FL 33140

Title: VP () Delete Title: () Change () Addition Name: CHUPIN NFD Name:

 Name:
 CHUPIN, NED
 Name:

 Address:
 4775 COLLINS AVE #2103
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33140
 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: MICHAEL CAPPONI P,S 04/29/2005