

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000105782

Entity Name: CAPITAL CONTROLS CO, INC

FILED
Dec 07, 2006
Secretary of State

Current Principal Place of Business:

1121 CRANDON BLVD
F-207
KEY BISCAYNE, FL 33149

Current Mailing Address:

1121 CRANDON BLVD
F-207
KEY BISCAYNE, FL 33149

New Principal Place of Business:

999 BRICKELL AVENUE
1002
MIAMI, FL 33131

New Mailing Address:

999 BRICKELL AVENUE
1002
MIAMI, FL 33131

FEI Number: 20-1391154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRIELE, AIDA
2701 LE JEUNE RD
300
CORAL GABLES, FL 33134 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: AIDA BRIELE

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BETHENCOURT, LUIS SR
Address: 1121 CRANDON BLVD
City-St-Zip: F-207, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BETHENCOURT, LUIS SR
Address: 340 WEST HEATHER DRIVE
City-St-Zip: MIAMI, FL 33149

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LUIS BETHENCOURT

P

12/07/2006

Electronic Signature of Signing Officer or Director

Date