

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000022334

Entity Name: CAPAVI, INC.

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2900 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

2900 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

FEI Number: 20-2459144

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAHAEL, GISELE  
2900 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RAHAEL, GISELE  
Address: 2900 UNIVERSITY DR  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VS  
Name: RAHAEL, MICHAEL  
Address: 2900 UNIVERSITY DR  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: V  
Name: RAHAEL, JOSEPH  
Address: 2900 UNIVERSITY DR  
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby 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 all other like empowered.

SIGNATURE: GISELE RAHAEL

P

04/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date