2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P05000039477

Entity Name: CAPITAL CARE GROUP, INC.

Current Principal Place of Business:

5201 BLUE LAGOON DR., 8TH FLOOR
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5201 BLUE LAGOON DR., 8TH FLOOR
MIAMI, FL 33126

New Mailing Address:

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

Name and Address of Current Registered Agent:

IGLESIAS, MANUEL E ESQ.
C/O BECKER & POLIAKOFF, P.A.
121 ALHAMBRA PLAZA 10TH FLR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

IGLESIAS, MANUEL E ESQ.
701 BRICKELL AVENUE
SUITE 1900
MIAMI, FL 33131 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: MANUEL E. IGLESIAS 04/28/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Change (X) Addition
Name: IGLESIAS, MANUEL E
Address: 701 BRICKELL AVENUE, SUITE 1900
City-St-Zip: MIAMI, FL 33131

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: MANUEL E. IGLESIAS, ESQ. RA 04/28/2006
Electronic Signature of Signing Officer or Director Date