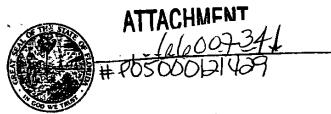
## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 28, 2006 8:00 am Secretary of State

DOCUMENT # P05000121429  1. Entity Name GARY E CAPUANO TRUST INC						03-09-20	06 90156 021 **	_
Principal Place of Business Mailing Address							6600734	1
530 E CENTRAL BLVD 530 E CENTRAL BLVD #1601								
ORLANDO, FL 32801 ORLANDO, FL 32801					A LEGISTER F	BOTH BING BOTH ROM BY	NT) HBIB 2881 (280 628) 8 (8) (	PATRI N IPRI
Principal Place of Business     3. Mailing Address								
Suite, Apt. #, etc. Suite, Apt. #, etc.					A:- B	00050044445		
City & State		City & State			02232006	Chg-P	CR2E034 (11/05)	
					35-2	260318	<del></del>	pplied For fot Applicable
Zip	Country	Zip Count		itry	5. Certificate	of Status Desired	S8.75 Ad	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
CAPUANO, GARY				Name .				
530 E CENTRAL BLVD #1601				Street Address (	(P.O. Sox Numb	er is Not Acceptab	le)	
ORLANDO, FL 32801								
	2	· · · · · · · · · · · · · · · · · · ·		City			FL Zip Cox	
8. The above names on the obligations of reco	tip aubmits his statement to stered agent.	or the purpose of changing its	register	ed office or register	red agent, or bo	th, in the State of Fl	lorida. I am familiar with	, and accept
SIGNATURE Schwing princip of Propagal pages and Size I spoil(cable Annual p								
Signature, tylo	ed of bringed reune of registered agent	and title if applicable. (NOT	E: Registere	d Agent signature required	d when reinstating)		DATE	
FILE NOW!! After May 1, 20	! FEE IS \$150.00 06 Fee will be \$550.				.00 May Be ied to Fees			•
10.	OFFICERS AND		11.		ADDITIONS	CHANGES TO OF	FICERS AND DIRECTOR	
THE GARY E. CAPUANO Determine STREET ADDRESS 530 E. CENTRAL BLVD. #160			TITL	- I			☐ Change	Addition
				ET ADDRESS +ST-ZIP				
TITLE PRESIDENT, OI RECORD Debete			III.				☐ Change	Addition
MARE	`   N			-				
STREET ADORESS CITY-ST-ZIP	1			ET ADDRESS -ST-ZIP				
TITLE		Delete	TITL	- I			☐ Change	Addition
STREET ADDRESS			NAM STRE	E ET ADDRESS				
City-SI-ZIP		· <u>:</u>		-\$T-ZIP	· ·	<u>-</u>	-	··
TITLE NAME		☐ Detete	TITL!	I			☐ Change	☐ Addition
STREET ADDRESS			STRE	ET ADORESS				
CHY-ST-ZIP		Delete	TITU	-SI-ZIP			Change	☐ Addition
HAME		C 0246	NAM	ı ı			C) Charge	E ADDITOR
STREET ACORESS CITY-ST-ZIP				ET ADDRESS - ST-ZIP				i
пи.		☐ Detate	ımı	<del></del>		<u>.</u>	☐ Change	Addition
HAME			NAM	<b>I</b>				
CIDEET ADODGES			1	- 1				
STREET ADORESS CITY-ST-ZIP			STRE	ET ADDRESS • ST • ZIP	•	· .		
CITY-ST-ZIP	the Information supplied with	this filing does not qualify to	SIRE CITY	ET ADDRESS -ST-ZP	d in Chapter 119	, Florida Statutes.	further certify that the i	information
CITY-ST-ZIP	the information supplied with out or supplemental report- the receiver on the size emp trachytent with an address,	n this filing does not qualify to state and eccurate and that reversions and execute this report your alfother like empowered	SIRE CITY	ET ADDRESS -ST-ZP	d in Chapter 119 same legal effec 7, Florida Statute	Florida Statutes, It as if made under s; and that my name	I further certify that the i oath; that I am an office the appears in Block 10 o	information r or director r Block 11 if



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 23, 2006

GARY E CAPUANO TRUST INC 530 E CENTRAL BLVD #1601 ORLANDO, FL 32801

SUBJECT: GARY E CAPUANO TRUST INC

Ref. Number: P05000121429

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/reinstatement application form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

PAMELA YARBOR OPS

Letter Number: 706A00013056

RESENT 3-24-06