2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000004312

Entity Name: FIRST CAPITAL RESOURCES, CORP.

FILED Aug 17, 2007 Secretary of State

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

9165 PARK DR., STE. 8 11950 W. DIXIE HWY MIAMI SHORES, FL 33138 US **SUITE # 200**

MIAMI, FL 33161

New Mailing Address:

Current Mailing Address:

9165 PARK DR 11950 W. DIXIE HWY

SUITE#8 SUITE # 200

MIAMI SHORES, FL 33138 US MIAMI, FL 33161 US

FEI Number: 20-4133841 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ESTIME-THOMPSON, P.A. ESTIME-THOMPSON, P.A. 11950 W. DIXIE HWY 9165 PARK DR SUITE # 200 SUITE#8 MIAMI, FL 33161 US MIAMI SHORES, FL 33138 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: RUBEN THOMPSON 08/17/2007

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

DE PONS, PATRICIA DE PONS, PATRICIA Name: Name: 9165 PARK DR - SUITE # 8 11950 W. DIXIE HWY - SUITE # 200 Address: Address:

City-St-Zip: MIAMI SHORES, FL 33138 US City-St-Zip: MIAMI, FL 33161 US

Title: VΡ (X) Delete Title: () Change () Addition

DE PONS, PATRICIA L Name: Name: 9165 PARK DR - SUITE # 8 Address: Address: City-St-Zip: MIAMI SHORES, FL 33138 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA L. DE PONS PDT 08/17/2007