

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000088560

**FILED**  
**Sep 16, 2009**  
**Secretary of State****Entity Name:** CAPADREA INVESTMENT INC.**Current Principal Place of Business:**3626 ALCANTARA AVE.  
DORAL, FL 33178**New Principal Place of Business:****Current Mailing Address:**3626 ALCANTARA AVE.  
DORAL, FL 33178**New Mailing Address:****FEI Number:** 20-5152848**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ARIANO, HILCIA  
3626 ALCANTARA AVE.  
DORAL, FL 33178 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: PT ( ) Delete  
Name: ARIANO, HILCIA  
Address: 3626 ALCANTARA AVE.  
City-St-Zip: DORAL, FL 33178

Title: V ( ) Delete  
Name: ARIANO, RODOLFO  
Address: 3626 ALCANTARA AVE.  
City-St-Zip: DORAL, FL 33178

Title: S ( ) Delete  
Name: ARIANO, LUCY  
Address: 3626 ALCANTARA AVE.  
City-St-Zip: DORAL, FL 33178

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: ARIANO, LUCY  
Address: 3626 ALCANTARA AVE.  
City-St-Zip: DORAL, FL 33178

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: HILCIA ARIANO

P

09/16/2009

Electronic Signature of Signing Officer or Director

Date