2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000154264

FILED Sep 30, 2009 Secretary of State

Entity Nam	ie: CAPOTE	CORP.			
Current Pri	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
1611 SW 93 MIAMI, FL 3					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1611 SW 93 MIAMI, FL 3					
FEI Number:	20-8164534	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
BLUM, SAMUEL S 2666 TIGERTAIL AVE., SUITE 106 COCONUT GROVE, FL 33133 US			9055 SW 73 COURT		
The above in the State		ubmits this statement for the pu	rpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: CHRISTINA ANTONELL				09/30/2009	
	Electron	ic Signature of Registered Agen	nt	Date	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () CAPOTE, GIANO 1611 SW 93RD MIAMI, FL 3316	CT.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VSD () CAPOTE, FERN 1611 SW 93RD MIAMI, FL 3316	CT.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: GIANCARLO CAPOTE **PRES** 09/30/2009