## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000043523

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

ORLANDO, FL 32817 US

1802 CRESCENT BLVD.

ORLANDO, FL 32817 US

MARTIN, MELISSA

( ) Delete

STD

tv Name: KAPITAL ENTERTAINMENT CORPORATION

FILED Jul 02, 2009 Secretary of State

Entity Nar	ne: Kapital	ENTERTAINMENT CORPORA	ATION			
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
	PINGTON ST. ), FL 32817	US				
Current Mailing Address:			New Maili	ing Address:		
	PINGTON ST. ), FL 32817	US				
FEI Number:	26-2521657	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired (X)		
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:		
5125 ADAN SUITE 500		,				
	named entity : e of Florida.	submits this statement for the p	urpose of changing i	its registered office or registered agent, or bot	h,	
SIGNATUF	RE:					
	Electror	nic Signature of Registered Age	nt	Date	_	
		3(2)(b), F.S., the corporation did not g Trust Fund Contribution (  ).	t receive the prior notic	ce.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	HARRISON, TO 6650 SUNSET		Title: Name: Address: City-St-Zip:	PD (X) Change () Addition MARTIN, JUSTIN 1802 CRESCENT BLVD ORLANDO, FL 32817 US		
Title: Name: Address:	VD ( ) MARTIN, JUST 11637 ORPING		Title: Name: Address:	VD (X) Change ( ) Addition GONZALEZ, ENRIQUE 413 DEFRWOOD AVE		

City-St-Zip: ORLANDO, FL 32825 US

() 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JUSTIN MARTIN PD 07/02/2009