

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39431

Entity Name: CAP BON INVESTMENTS, INC.

FILED
Feb 20, 2008
Secretary of State

Current Principal Place of Business:

3162 COMMODORE PLAZA
1-F1
MIAMI, FL 33133 US

Current Mailing Address:

P.O BOX 330788
MIAMI, FL 33233 US

New Principal Place of Business:

2100 PONCE DE LEON BLVD.
1175
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 98-0056113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GUGLIOTTA, ANNABELLA
3162 COMMODORE PLAZA
1-F1
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

GUGLIOTTA, ANNABELLA
2100 PONCE DE LEON BLVD.
1175
MIAMI, FL 33134 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: _____

02/20/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUGLIOTTA, ANNABELLA M P
Address: 3162 COMMODORE PLAZA 1F1
City-St-Zip: MIAMI, FL 33133

Title: VP () Delete
Name: GUGLIOTTA, MARIA G VP
Address: 3162 COMMODORE PLAZA 1F1
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GUGLIOTTA, ANNABELLA M P
Address: 2100 PONCE DE LEON BLVD. #1175
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: GUGLIOTTA, MARIA G VP
Address: 2100 PONCE DE LEON BLVD. #1175
City-St-Zip: CORAL GABLES, FL 33134

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: ANNABELLA GUGLIOTTA

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02/20/2008

Electronic Signature of Signing Officer or Director

Date