

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jun 25 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000031208 (0)**
1. Corporation Name
CAPITAL IMPROVEMENT GROUP, INC.



Principal Place of Business 1277 W. CAMINO REAL BOCA RATON FL 33486	Mailing Address 1277 W. CAMINO REAL BOCA RATON FL 33486
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 100 SE 5TH AVE #509 Suite, Apt. #, etc. 22 #509 City & State 23 BOCA RATON Zip 24 33432 Country		2a. Mailing Address 26 100 SE 5TH AVE Suite, Apt. #, etc. 27 #509 City & State 28 BOCA RATON Zip 29 33432 Country		3. Date Incorporated or Qualified 04/28/1993	
		4. FET Number 65-0403807		Applied For ☐ Not Applicable	
		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent ROGERS, SUSAN 1277 W. CAMINO REAL BOCA RATON FL 33486		10. Name and Address of New Registered Agent 81 Name SILVANA RODRIGUES 82 Street Address (P.O. Box Number is Not Acceptable) 100 SE 5TH AVE #509 83 84 City BOCA RATON FL 85 Zip Code 33432	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **SILVANA RODRIGUES** *Silvana Rodriguez* **06/19/98**
Signature type for printed name of new registered agent (if only is registered Agent signature required when reinstalled) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	☒ DELETE	1.1 TITLE DIRECTOR	☐ Change ☒ Addition
NAME ROGERS, SUSAN		1.2 NAME GUNTHER WALCHER	
STREET ADDRESS 1277 W. CAMINO REAL		1.3 STREET ADDRESS 100 S.E. 5TH AVE. #509	
CITY-ST-ZIP BOCA RATON FL 33486		1.4 CITY-ST-ZIP BOCA RATON, FL 33432	
TITLE D	☒ DELETE	2.1 TITLE PRESIDENT	☐ Change ☒ Addition
NAME KURT DRAXL		2.2 NAME GUNTHER WALCHER	
STREET ADDRESS 1277 W. CAMINO REAL		2.3 STREET ADDRESS 100 S.E. 5TH AVE #509	
CITY-ST-ZIP BOCA RATON FL 33486		2.4 CITY-ST-ZIP BOCA RATON, FL 33432	
TITLE	☐ DELETE	3.1 TITLE VICE-PRESIDENT	☐ Change ☒ Addition
NAME		3.2 NAME GUNTHER WALCHER	
STREET ADDRESS		3.3 STREET ADDRESS 100 S.E. 5TH AVE #509	
CITY-ST-ZIP		3.4 CITY-ST-ZIP BOCA RATON, FL 33432	
TITLE	☐ DELETE	4.1 TITLE SECRETARY	☐ Change ☒ Addition
NAME		4.2 NAME GUNTHER WALCHER	
STREET ADDRESS		4.3 STREET ADDRESS 100 S.E. 5TH AVE #509	
CITY-ST-ZIP		4.4 CITY-ST-ZIP BOCA RATON, FL 33432	
TITLE	☐ DELETE	5.1 TITLE TREASURER	☐ Change ☒ Addition
NAME		5.2 NAME GUNTHER WALCHER	
STREET ADDRESS		5.3 STREET ADDRESS 100 S.E. 5TH AVE #509	
CITY-ST-ZIP		5.4 CITY-ST-ZIP BOCA RATON, FL 33432	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation; the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in the attachment with an address.

SIGNATURE *[Signature]* **6/19/98 (561) 297-4239**

CR2E034 (10/97)