

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000040558

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: CAPRI INTERNATIONAL, INC.

## Current Principal Place of Business:

3605 SW 139TH AVE  
MIAMI, FL 33175 US

## New Principal Place of Business:

## Current Mailing Address:

P.O.BOX 5009  
IMMOKALEE, FL 34143 US

## New Mailing Address:

P.O.BOX 770549  
NAPLES, FL 34107 US

FEI Number: 65-0518909

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HASSAM, JANETH  
3605 S.W. 139 AVENUE  
MIAMI, FL 33175 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HASSAM, JANETH  
Address: 3605 S.W. 139 AVENUE  
City-St-Zip: MIAMI, FL 33175

Title: VP ( ) Delete  
Name: HASSAM, DIAMIL  
Address: 3605 S.W. 139 AVENUE  
City-St-Zip: MIAMI, FL 33175

Title: ST ( ) Delete  
Name: HASSAM, NIVIAN  
Address: 3605 S.W. 139 AVENUE  
City-St-Zip: MIAMI, FL 33175

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JANETH HASSAM

PD

04/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date