

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

FILED

**Apr 28 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000038085 (2)
1. Corporation Name
CAPRICHI ENTERPRISES, INC.



Principal Place of Business 627 SANDPINE CIRCLE, SUITE 3128 DEERFIELD BEACH FL 33441	Mailing Address 627 SANDPINE CIRCLE, SUITE 3128 DEERFIELD BEACH FL 33441-7728
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/01/1996	3a. Date of Last Report
21. 8129 BOCA RIO DR.	26. SAME	4. FEI Number 65-01662727		Applied For Not Applicable	
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. BOCA RATON FLORIDA	28. SA ME	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. 33433	25. U.S.A.	29. ME		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

10. Name and Address of New Registered Agent

81. Name RICHARD NIDDAM
82. Street Address (P.O. Box Number is Not Acceptable) 8129 BOCA RIO DR.
83. City & State BOCA RATON, FLORIDA FL
84. Zip Code 33433

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 **RICHARD NIDDAM** (Signature) **04/07/97** (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	SAME
NAME	NIDDAM, MAX	1.2 NAME	SAME
STREET ADDRESS	7520 LAPAZ COURT, #101	1.3 STREET ADDRESS	SAME
CITY-ST-ZIP	BOCA RATON FL 33433	1.4 CITY-ST-ZIP	SAME
TITLE	V	2.1 TITLE	V. PRESIDENT
NAME	NIDDAM, RICHARD	2.2 NAME	SAME
STREET ADDRESS	627 SANDPINE CIRCLE, SUITE 3128	2.3 STREET ADDRESS	8129 BOCA RIO DR.
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	2.4 CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	S	3.1 TITLE	SECRETARY & TREASURER
NAME	NIDDAM, ALINE	3.2 NAME	SAME
STREET ADDRESS	7520 LAPAZ COURT, #101	3.3 STREET ADDRESS	SAME
CITY-ST-ZIP	BOCA RATON FL 33433	3.4 CITY-ST-ZIP	SAME
TITLE	T	4.1 TITLE	
NAME	CAPE, BRIAN	4.2 NAME	
STREET ADDRESS	5 REDLAND CRESCENT EAST	4.3 STREET ADDRESS	
CITY-ST-ZIP	SCARBOROUGH, ONTARIO M1M1B7	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 or 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 on an attachment with an address.

SIGNATURE: **RICHARD NIDDAM** (Signature) **04-07-97** (DATE) **561-470-9905** (PHONE)

CFR2E034 (9/96)