

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State

04-12-2004 90307 006 ***150.00

DOCUMENT # P96000038085

1. Entity Name
CAPRICHI ENTERPRISES, INC.



Principal Place of Business Mailing Address
5814 NW 49TH LANE 5814 NW 49TH LANE
COCONUT CREEK, FL 33073-2334 US COCONUT CREEK, FL 33073-2334 US

34040000

2. Principal Place of Business 3. Mailing Address
12387 Clearfalls Dr. 12387 Clearfalls Dr.
Suite, Apt. #, etc. Suite, Apt. #, etc.
Boca Raton, FLORIDA Boca Raton, FL.
City & State City & State



01072004 Chg-P CR2E034 (10/03)

Zip Country Zip Country
33428 USA 33428 USA

4. FEI Number Applied For
65-0662727 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NIDDAM, RICHARD
5814 NW 49TH LANE
COCONUT CREEK, FL 33433

Name **RICHARD NIDDAM**
Street Address (P.O. Box Number is Not Acceptable)
12387 Clearfalls Dr.
Boca Raton FL.
City **FL** Zip Code **33428**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

DATE **1/07/04**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	NIDDAM, RICHARD	5814 NW 49TH LANE	COCONUT CREEK, FL 330732334	<input type="checkbox"/>
VP	NIDDAM, MAX	7520 LA PAZ CT #101	BOCA RATON, FL 33433	<input type="checkbox"/>
ST	NIDDAM, ALINE	7520 LAPAZ COURT, #101	BOCA RATON, FL 33433	<input type="checkbox"/>
T	NIDDAM, LORI	5814 NW 49TH LANE	COCONUT CREEK, FL 330732334	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
P	NIDDAM, RICHARD	12387 Clearfalls Dr.	Boca Raton, FL. 33428-4846	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
T	LORI NIDDAM	12387 Clearfalls Dr.	Boca Raton, FL. 33428-4846	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **RICHARD NIDDAM**

DATE **1/07/04** Daytime Phone # **561-451-4686**