2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2005 8:00 am
Secretary of State
07-07-2005 90001 017 ***150.00

DOCUMENT # P96000083191

1. Entity Name
CAPRICE GROUP, INC.

14018083

Principal Place of Business	Mailing Address
11430 S.W. 103 STREET MIAMI, FL 33176	11430 S.W. 103 STREET MIAMI, FL 33176

06302005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0791275
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GUTSTEIN, MARGARITA
11430 S.W. 103 STREET
MIAMI, FL 33176

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

FILE NOW!!! FEE IS $550.00
Due by September 7, 2005

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GUTSTEIN, JOSE
STREET ADDRESS	11430 S.W. 103 STREET
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	D
NAME	GUTSTEIN, MARGARITA
STREET ADDRESS	11430 S.W. 103 STREET
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	D
NAME	GUTSTEIN, MIRON
STREET ADDRESS	11430 S.W. 103 STREET
CITY-ST-ZIP	MIAMI, FL 33176
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: M Gutstein 6/30/05 305 595 9618
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

14018083

#P96000083191

June 30, 2005

Department of State
Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Ref: Administrative Division

To Whom it May Concern:

Today I received a Corporate Notice of Dissolution, stating that my corporation, Caprice Group Inc., will be involuntary dissolved by September 7, 2005 if the report is not filed in a timely manner.

I am unaware of having received the First Notice for filing the report for this year. This has been an extremely hectic period for me. During the past several months, I have undergoing two heart angioplasty procedures , as well as a hip replacement surgery.

Upon receiving the Notice of Dissolution, I am taking immediate action to remedy the situation. Needless to say, I am very distressed about this, and I'm responding right away, hoping it can be resolved.

We have always filed in a timely manner, and we respectfully request that you permit us to pay the normal filing fee of $ 150.00.

Please be understanding of my situation and the factors that caused this to happen.

Sincerely,

Miron G. Gutstein
Director
Caprice Group Inc.
11430 S.W. 103 St.
Miami, Fl. 33176
PH: 305-595-9618