2006 FOR PROFIT CORPORATION

Jan 25, 2006 08:00 AM **ANNUAL REPORT** DOCUMENT # P96000083191 **Secretary of State** 1. Entity Name CAPRICE GROUP, INC. Mailing Address Principal Place of Business 11430 S.W. 103 STREET 11430 S.W. 103 STREET MIAMI, FL 33176 MIAMI, FL 33176 01212006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0791275 Not Applicat **\$8.75** Additio<u>na</u>l 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent **GUTSTEIN, MARGARITA** DO NOT WRITE 11430 S.W. 103 STREET MIAMI, FL 33176 IN THIS SPACE 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 even the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when rehystating) DATE \$5.00 May Be 9. Election Campaign Financing File NOWIII FEE 18 \$150.00 After May 1, 2006 Fee will be \$550.00 Added to Fees Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE **GUTSTEIN, JOSE** MALSE STREET ADDRESS 11430 S.W. 103 STREET CITY-ST-ZP MIAMI, FL 33176 000000400835 02/02/06-80019-023 150.00 TITLE NAME **GUTSTEIN, MARGARITA** 11430 S.W. 103 STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33176 TITLE NAME **GUTSTEIN, MIRON** STREET ADDRESS 11430 S.W. 103 STREET DO NOT WRITE CITY-ST- AP MIAMI, FL 33176 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP THE MAME STITLET ADDRESS CITY-ST-ZIP TITLE MAINT STREET ADDRESS

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under only, that I am an officer or discording 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 is

CITY-ST-ZIP

SIGNATURE: