2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P9700009424 1. Entity Name CAPAVESI TRADING CORPORATION

FILED
Jul 22, 2004 08:00 AM
Secretary of State

Principal Place of Business

328 CRANDON BLVD.

SUITE #116

KEY BISCAYNE, FL 33149 US

Mailing Address

328 CRANDON BLVD. SUITE #116

KEY BISCAYNE, FL 33149

US



07152004

No Chg-P

CR2E034 (10/03)

FEI Number
 65-0724744

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

LOPEZ, PAULA 228 CRANDON BLVD. SUITE 116 KEY BISCAYNE, FL 33149

DC	NOT	WRITE
IN	THIS	SPACE

KEY BISCAYNE, FL 33149			IN THIS SPACE			
8. The above named entity submits this statement for the the obligations of registered agent. SIGNATURE SIGNATURE	purpose of changing its registered offi	ice or re	gistered agent, or bo	oth, in the State of Florida. I am familiar with, and	accept	
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered			equired when reinstating)	DATE		
FILE NOWIII FEE IS \$150.00 Due by September 8, 2004	Election Campaign Financing Trust Fund Contribution.	П	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S corporation did not receive the prior not	S., the ice.	
10. OFFICERS AND DIRECTORS						
NAME LOPEZ, PAULA M STREET ADDRESS 328 CRANDON BLVD. KEY BISCAYNE, FL 33149				Booopoiracha		
TITLE NAME STREET AODRESS CITY-ST-ZIP				000000167654 07/22/04-80003-018 150.0	10	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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: 1

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTO

305-365/993

Daytime Phone !