PROFIT CORPORATION ANNUAL REPORT

1998



Mailing Address

SUITE 5

**B400 BAYMEADOWS WAY** 

JACKSONVILLE FL 32256

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000047635 (2)

CAPBRIDGE, INC.

Principal Place of Business

8400 BAYMEADOWS WAY

JACKSONVILLE FL 32256

SUFFE 5

98 SEP 30 AM 10: 20

SECHILIANY OF STATE TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

				<ol> <li>Date Incorporated or Qualified 05/29/1997</li> </ol>		
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For	
21		26		59-3451634	Not Applicable	
Suite, Apt.	#, etc.	Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Foe Required	
City & Stat 23	le	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
7ір 24	Country 25	Zip 29	Country 30	This corporation owes or has paid the c     Personal Property Tax due June 30.	curr <b>en</b> t year Intangible	
5 .2. <b>1</b>	9. Name and Address of Current			10. Name and Address of New Registere		
ELE	FANT, FRED		81 Name		·	
1650	PRUDENTIAL DRIVE		62 Street Add	ress (P.O. Box Number is Not Acceptable)		
SUIT	TE 105					
JACI	KSONVILLE FL 32207		83	83		
			84 City		85 Zip Code	
11. Pursuant	to the provisions of sections 607.0502	and 607 1508. Florida Statutes	the above pamed come	pration submits this statement for the purpose of	ch <b>en</b> ging its registered	
omce or	regist <b>ere</b> d agent, or both, in the State c am fa <b>rni</b> liar with, and accept the obligat	of Horida. Such change was a	uthorized by the corporati	ion's board of directors. I hereby accept the app	ointment as registered	
SIGNATURE	<u> </u>					
	Signature, types or printed name of registered agent.  OFFICERS AND		If Registered Agent signature req		. <del></del>	
12. TITLE	D - OFFICERS AND	<b>f</b> 7	13. 1.1 10 LE	ADDITIONS/CHANGES TO OFFICERS	" r ' ; " · · · · · · · · · · · · · · · · · ·	
NAME	CAPELLA, LES	[ ] DELETE	1.2 NAME		Change   Addition	
STREET ADDRESS	111 N. POMPANO BEACH, #10	11		200002655	<b>:96</b> 23	
CITY-ST-ZIP	POMPANO BEACH FL 33062	11	1.3 STREET ADDRESS	<b>20</b> 0002655 -10/05/981	01133004	
TITLE	n	f 1 min	1.4 CITY-ST-ZIP 2.1 TITLE	****150.00	) <del>- ***</del> *150.00	
NAME	TROWBRIDGE, KEITH	[.]DELETE	2.2 NAME		Change Addition	
STREET ADDRESS	7900 E. BAYMEADOWS CIRCLE	#37	2 3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32256	, , , ,	2.4 CITY-ST-ZIP			
MILE		DELETE	311ITLE		Dollar Danie	
NAME		į jurieni	3.2 NAME		Change . Addition	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 Ort y-S1-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME P		E "J DECCTE	4.2 NAME		Change [ ] Addition	
STREE ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE	- Alggadester	DELETE	51 TITLE		Change Addition	
NAME		2.,	5.2 NAME		orange [ ] race(0)	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CHTY-S1-ZIP	. ~		
ITLE		[ ] DECETE	6111111	, W	Change Addition	
IAME			6.2 NAMF	Ų.	7017·118	
STREET ADDRESS			63 STREET ADDRESS	O/	100°	
CITY-ST-Z/P			6.4 CH Y-ST-ZIP		· -	
an officer o	o unis <b>a</b> nnuai report <b>o</b> r subblemontal ar	nnual report is true and accura Net or trustee envoywered to	te and that my signature.	tion 119.07(3)(i), Florida Statutes. I further certify shall have the same legal effect as if made und quired by Chapter 607, Florida Statutes; and tha	tor nath: that I am	
CICNAT	UDE X	h -		Q = 0 () 0		

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## KRANT, BIALICK & LUISI, LLP

CERTIFIED PUBLIC ACCOUNTANTS
420 LEXINGTON AVENUE
NEW YORK, N. Y. 10170

(212) 682-1900

FACSIMILE (212) 682-5279

September 14, 1998

Division of Corporations Annual Reports Filing P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Capbridge, Inc. ID: 59-3451634

## To Whom It May Concern:

The above captioned taxpayer is in receipt of your request for filing of an Annual report for the 1998 tax year.

This report was originally sent to your office in January of 1998. For some reason it was never processed and the original check never cleared. We have since stopped payment on the original check and have reissued a check in the amount of \$150.

We respectfully request the late filing penalty be removed and that the enclosed filing be accepted as timely.

If you should have any questions or need further documentation, please do not hesitate to contact the undersigned.

Very truly yours,

Lawrence S, Gitlitz, CPA

LSG:fr enc.