

2002 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # **P97000070834**

1. Entity Name
CAPITAL INTERNATIONAL LIMITED, INC.

FILED

02 JUL 15 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**1241 S.W. 124TH CT., SUITE C
MIAMI FL 33184**

Mailing Address
**1241 S.W. 124TH CT., SUITE C
MIAMI FL 33184**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0786564**

Applied For

Not Applicable

Zip Country

Zip Country

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

**COBIAN, STACY
1241 S.W. 124TH CT., SUITE C
MIAMI FL 33184**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PCEO						
	COBIAN, OSCAR	80 FLOWER AVE	WASHINGTON NJ 07882				
	CD						
	COBIAN, OSCAR	80 FLOWER AVE	WASHINGTON NJ 07882				
	VPD						
	COBIAN, NANCY	80 FLOWER AVE	WASHINGTON NJ 07882				
	VST						
	COBIAN, STACY	1241 S.W. 124TH CT., SUITE C	MIAMI FL 33184				

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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Stacy Cobian*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/02 305 610 9550
Date Daytime Phone #

CR2E034 (9/01)



ACCOUNT NO. : 072100000032

REFERENCE : 664670 7169540

AUTHORIZATION : Patricia Pizots

COST LIMIT : \$ 558.75

ORDER DATE : July 16, 2002

ORDER TIME : 11:13 AM

ORDER NO. : 664670-005

CUSTOMER NO: 7169540

CUSTOMER: Mr. Oscar Cobian
Mr. Oscar Cobian
80 Flower Avenue

Washington, NJ 07882

RECEIVED
02 JUL 16 AM 11:39
DEPARTMENT OF STATE
OFFICE OF CORPORATE
AFFAIRS/STATE FILING

ANNUAL REPORT FILING

NAME: CAPITAL INTERNATIONAL LIMITED,
INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward-EXT#1135

EXAMINER'S INITIALS: _____