2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2009
Secretary of State

DOCUMENT# P97000070841

Entity Name: THE CAPO GROUP, INC.

Current Principal Place of Business:

1150 NW 72ND AVE . PH2
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

1150 NW 72ND AVE . PH2
MIAMI, FL 33126

New Mailing Address:

FEI Number: 65-0829308 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRODIE, SIDNEY Z
7270 NW 12TH ST., PH-I
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

BRODIE, SIDNEY Z
1150 N W 72 AVE
PH
MIAMI, FL 33126 US

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: _____ 04/18/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CAPO, ALEJANDRO
Address: 1150 NW 72 AVE PH-2
City-St-Zip: MIAMI, FL 33126

Title: S ( ) Delete
Name: CADO, CARMEN
Address: 1150 NW 72 AVE PH-2
City-St-Zip: MIAMI, FL 33126

Title: V ( ) Delete
Name: CAPO, CATHERINE
Address: 1150 NW 72 AVE PH-2
City-St-Zip: MIAMI, FL 33126

Title: V ( ) Delete
Name: GRIMBERG, SEAN
Address: 1150 NW 72 AVE PH-2
City-St-Zip: MIAMI, FL 33126

Title: V ( ) Delete
Name: REYES, RAFAEL
Address: 1150 NW 72 AVE PH-2
City-St-Zip: MIAMI, FL 33126

Title: T ( ) Delete
Name: HERNANDEZ, ARTHUR
Address: 1150 NW 72 AVE PH-2
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: CAPO, CARMEN
Address: 1150 NW 72 AVE PH-2
City-St-Zip: MIAMI, FL 33126

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEJANDRO CAPO P 04/18/2009
Electronic Signature of Signing Officer or Director — Date