FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P9800001356

Mailing Address

1. Corporation Name CAPRI INTERNATIONAL PROPERTIES, INC.

FILED Mar 01, 1999 8:00 am Secretary of State 03-01-1999 90234 004 ***150.00



Principal Place of Business		Mailing Address						
6782 SARASEA CIRCLE		6782 SARASEA CIRCLE						
SARASOTA FL 34242		SARASOTA FL 34242				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		1
						01/05/1998		
		B. Mailing Addross				4. FEI Number	Apı	olied For
2. Principal Pla	ice of Business	2a. Mailing Address				522085597	No	t Applicable
21		Suite, Apt. #, etc.					. \$8.75 A	
Suite, Apt. #	e, etc.	├ -¬				5. Certificate of Status Desired	Fee Re	quired
22		City & State				6. Election Campaign Financing \$5.00 May Be		
City & State		⊢ ₁ '				Trust Fund Contribution	Added t	o Fees
23		Zip Country				8. This corporation owes the current year Inta	ingible	_
Zip	Country			Personal Property Tax.				
24	25					10. Name and Address of New Registered Agent		
	9. Name and Address of Current	Registered Agent		81	Name			
GIANCRISTOFORO, VERA				<u></u>		ress (P.O. Box Number is Not Acceptable)		
6702	SARASEA CIRCLE			82	Street Addr	ess (P.O. Box Number is Not Acceptation		
	SOTA FL 34242			83				Ì
SARA	GOIA IL STETE						85 Zip	Code
				1 1	City	FL	1.	ł
			- tho o	L L	named corn	poration submits this statement for the purpose of	changing its	registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of the purpose of changing its registered of t								
office or registered agent, of both, in the state of the obligations of, Section 607.0505, Florida Statutes.								-99
LANCESTUDIUM					eignature carultul	DATE DATE	/ - / -	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: F			13.		aignaturo roquiro	ADDITIONS CHANGES TO OFFICERS AN	ID DIRECTO	DRS IN 12
12.		D DIRECTORS/	1.1 T				☐ Change	☐ Addition
TITLE	<u> </u>		IAME					
NAME	GIANURISTUPUNU, VENA		- 1		ADDRESS			}
STREET ADDRESS	6782 SARASEA CIRCLE			HTY-ST-				
CITY-ST-ZIP	SANASUIA I E STETE		_	TILE	-ДГ		Change	☐ Addition
TITLE	ע −			AME			-	-
NAME	GIANURISTUPURO, JULIA				ADDRESS			}
STREET ADDRESS	DRESS 2030 GREENSPHING VALLET NO.			CITY-ST	į.	·		
CITY-ST-ZIP	SANASUIA FL STETE			riTLE	-211		☐ Change	☐ Addition
TITLE	D			NAME	l			.
NAME	SMITH, RICHARD L III	P.C.			ADDRESS			}
STREET ADDRESS	STREET ADDRESS 2000 GREENS FRING VALLET NO.							
CITY-ST-ZIP	SARASUTA FL 34242			CITY-ST	1.21		☐ Change	☐ Addition
TITLE				NAME	ļ			
NAME			- 6		ADDRESS		•	ļ
STREET ADDRESS			•		ADDRESS			
CITY-ST-ZIP				CITY-ST TITLE	1-212		[] Change	☐ Addition
TITLE		☐ DELETE		NAME	-			
NAME					ADDRESS			
STREET ADDRESS			1		1			}
CITY-ST-ZIP				CITY-ST	1-219		☐ Change	Addition
TITLE		☐ DELETE	1				_ •	Ţ
NAME				NAME				ļ
STREET ADDRESS	3		1		TADDRESS			ł
			. 64	CiTY-S	1-ZIP			information

14. 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 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 annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in