2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

06 OCT 23 AM 11:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000001356

1. Entity Name
CAPRI INTERNATIONAL PROPERTIES, INC.

Principal Place of Business	Mailing Address
C/O VERA GIANCRISTOFORO 6794 SARASEA CIRCLE SARASOTA, FL 34242	C/O VERA GIANCRISTOFORO 6794 SARASEA CIRCLE SARASOTA, FL 34242

09202006 REIN-P CR2E098 (11/05)

2. Principal Place of Business	3. Mailing Address
6794 Sarasea Cir.	2030 Greensp. Vly Rd E
Suite, Apt. #, etc.	Suite, Apt. #, etc. Stevenson
City & State: Siesta Key Fl.	City & State: md
Zip: 34242 Country: USA	Zip: 21153 Country: USA

4. FEI Number: 52-2085597 ☐ Applied For ☐ Not Applicable

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
GIANCRISTOFORO, VERA 6782 SARASEA CIRCLE SARASOTA, FL 34242	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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $750.00
After January 1, 2007, Fee will be $900.00

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GIANCRISTOFORO, VERA 6782 SARASEA CIRCLE SARASOTA, FL 34242	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 500081595135 11/07/06--01055--022 **150.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GIANCRISTOFORO, JULIA 2030 GREENSPRING VALLEY RD. SARASOTA, FL 34242	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SMITH, RICHARD L III 2030 GREENSPRING VALLEY RD. SARASOTA, FL 34242	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Vera Giancristoforo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

9-19-06 2/2

Dear Sir.

Please reinstate me. the P.O. did not forward my mail & was in Maryland Taking care of my daughter. She died 8/27/06.

do not let me pay that large fee, Please check & see that I paid on Time every year.

Truly Vera Giancristoro
6194 Sara Sea Cir.
Siesta Key. fl. 34242.

Mail TO 2030 greenspring Valley Rd.
Stevenson md
21153