

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000064366

1. Entity Name

CAP-EAST ASSOCIATES INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90055 029 ***150.00

Principal Place of Business

300 GRECO AVENUE
CORAL GABLES FL 33146

Mailing Address

300 GRECO AVENUE
CORAL GABLES FL 33146-1811

2. Principal Place of Business

10165 NW 19 STREET

Suite, Apt. #, etc.

3. Mailing Address

10165 NW 19 STREET

Suite, Apt. #, etc.

City & State MIAMI, FLORIDA

City & State MIAMI, FLORIDA

Zip 33172

Country

Zip 33172

Country

4. FEI Number 65-0859184

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

EDWARD W. EASTON

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

10165 NW 19 STREET

City MIAMI, FLORIDA

FL

Zip Code 33172

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 Edward W. Easton 04/07/2000

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, 2000 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

TITLE D
NAME EASTON, EDWARD W
STREET ADDRESS 300 GRECO AVENUE
CITY-ST-ZIP CORAL GABLES FL 33146 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME EASTON, EDWARD W
STREET ADDRESS 10165 NW 19 STREET
CITY-ST-ZIP MIAMI, FLORIDA 33172 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: Edward W. Easton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/07/00 (305) 593-222

Date

Daytime Phone #

CP2E034 (9/99)