2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000097626

FRIEDLI, MAX

124 ST.MARY'S STREET

BOSTON, FL 02215

Name:

Address:

City-St-Zip:

Entity Name: FIRST CAPITAL HOSPITALITY FINANCIAL GROUP, INC.

FILED Mar 30, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	SHINGTON A	VENUE				
#210 MIAMI BEA	ACH, FL 331	39				
Current Mailing Address:			New Mailing Address:			
1210 WASHINGTON AVENUE						
#210 MIAMI BEA	ACH, FL 331:	39				
FEI Number	: 65-0881037	FEI Number Applied For ()	FEI Number Not Applic	cable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and A	Name and Address of New Registered Agent:		
2731 EXEC SUITE 4	RVICES, INC. CUTIVE PAR , FL 33331 L					
	e named entity e of Florida.	submits this statement for the	purpose of changing its	s registered office or registered agent, or both,		
SIGNATUI	RE:					
Electronic Signature of Registered Age			ent	t Date		
Election Car	mpaign Financi	ng Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	CD (SELNA, FRAN 6136 W. KIMI GLENDALE, A	BERLY WAY	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	BUEHER, MA	NS AVE., #2503	Name: Address:	PD (X) Change () Addition BUEHER, MARTIN H 5724 N. BAYSHORE DR MIAMI, FL 33139		
Title: Name: Address: City-St-Zip:	D (HILL, JOSEPI 8 PARK PLAZ BOSTON, MA	ZA, #232	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: FRANK A. SELNA CD 03/30/2005