2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000058666

City-St-Zip:

SAO GONCALO, RJ

Entity Name: FLORIDA CAPITAL INVESTMENT, INC.

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
2266 NW : POMPANO	30 PL. O BEACH, FL 33069 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
2266 NW : POMPANO	30 PL. O BEACH, FL 33069 US			
FEI Number	: 65-0931641 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of	New Registered Agent:	
1261 E SA	SE CORPORATION MPLE RD D BEACH, FL 33064 US			
	e named entity submits this statement for the e of Florida.	purpose of changing its registered	office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered Ag	jent	Date	
Election Car	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD () Delete MARTINS, ABILIO J 7748 N.W. 47TH DR CORAL SPRINGS, FL 33067	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPSD () Delete DE LIMA REGINA, CLAUDIA M X 7748 N.W. 47TH DR CORAL SPRINGS, FL 33067	Title: (Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete EME EMPRESA ESTRELA, DE MINERACAO L T D. 106 KM5 2001 SAO GONCALO, RJ		() Change () Addition	
Title: Name: Address:	D () Delete MIRAK SA, ESTADO AMARAL PEIXOTO KM 11-5	Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: ABILIO MARTINS PTD 04/14/2005