

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P99000071646

Entity Name: 1ST CAPITAL FINANCE INC.

FILED
Apr 06, 2007
Secretary of State

Current Principal Place of Business:

129 N FEDERAL HWY
SUITE 201 B
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

13833 WELLINGTON TRACE
E4 #206
WEST PALM BEACH, FL 334148901

New Mailing Address:

FEI Number: 65-0940280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALM BEACH COMMERCIAL
129 N FEDERAL HWY
#201 B
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STJ TRUST,
Address: 13833 WELLINGTON TRACE E4 #206
City-St-Zip: WEST PALM BEACH, FL 33414

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PALM BEACH COMMERCIAL, L REAL ESTATE SERVICES
Address: 129 N FEDERAL HWY #201 B
City-St-Zip: LAKE WORTH, FL 33460

Title: P () Change (X) Addition
Name: MULLER, E
Address: 13833 WELLINGTON TRACE E4 #206
City-St-Zip: WELLINGTON, FL 33414

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

SIGNATURE: E MULLER

P

04/06/2007

Electronic Signature of Signing Officer or Director

Date