

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S52313

Entity Name: INVESTCAP, INC.

FILED
Jan 12, 2006
Secretary of State

Current Principal Place of Business:

750 MIDDLE RIVER DR
FT. LAUDERDALE, FL 33304 US

New Principal Place of Business:

2300 N.E. 9TH ST.
FT. LAUDERDALE, FL 33304 US

Current Mailing Address:

750 MIDDLE RIVER DR
FT. LAUDERDALE, FL 33304 US

New Mailing Address:

2300 N.E. 9TH ST.
S. 3
FT. LAUDERDALE, FL 33304 US

FEI Number: 65-0270490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLBIK GOFFREDO
750 MIDDLE RIVER DR
FT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

HOLBIK, GOFFREDO R
2300 N.E. 9TH ST.
S. 3
FT LAUDERDALE, FL 33304 US

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: HOLBIK GOFFREDO R.

01/12/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLBIK, GOFFREDO,
Address: 750 MIDDLE RIVER DR
City-St-Zip: FT LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOLBIK, GOFFREDO R
Address: 2300 N. E. 9TH ST.
City-St-Zip: FT LAUDERDALE, FL 33304

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: HOLBIK GOFFREDO

D

01/12/2006

Electronic Signature of Signing Officer or Director

Date