

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morrison  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 MAY -1 AM 11:58

DOCUMENT # **V55380** (2)

1. Corporation Name  
**CAPILL' FRANCE INTERNATIONAL CORPORATION**

Principal Place of Business: **3909 N.E. 163RD STREET SUITE 201 NORTH MIAMI BEACH FL 33160**  
Mailing Address: **3909 N.E. 163RD STREET SUITE 201 NORTH MIAMI BEACH FL 33160**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>08/05/1992</b>		3a. Date of Last Report <b>08/17/1994</b>	
4. FEI Number <b>65-0355553</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

21. Principal Place of Business <b>6954 N.W. 51 ST</b>	2a. Mailing Address <b>6954 N.W. 51 ST</b>
22. Suite, Apt. #, etc —	27. Suite, Apt. #, etc —
23. City & State <b>Miami FL</b>	28. City & State <b>Miami FL</b>
24. Zip <b>33166</b>	25. Country <b>U.S.A.</b>
29. Zip <b>33166</b>	30. Country <b>USA</b>

9. Name and Address of Current Registered Agent <b>SUAREZ, LUIS 3909 N.E. 163RD ST. SUITE 201 NORTH MIAMI BEACH FL 33160</b>		10. Name and Address of New Registered Agent	
B1 Name <b>Daniel Perez</b>		B2 Street Address (P.O. Box Number is Not Acceptable) <b>3118 N.W. 99 PL</b>	
B3		B4 City <b>Miami</b>	
		B5 State <b>FL</b>	
		B6 Zip Code <b>33178</b>	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **May 16/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<b>DANIEL, PEREZ G.</b> 3909 NE 163RD ST, #201 N MIAMI BEACH FL	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>P</b>
NAME		1.2 NAME	<b>Daniel Perez G</b>
STREET ADDRESS		1.3 STREET ADDRESS	<b>3118 N.W. 99 PL</b>
CITY - ST - ZIP		1.4 CITY - ST - ZIP	<b>Miami FL 33178</b>
TITLE <b>VP</b>	<b>DANIEL, PEREZ D.</b> 3909 N.E. 163RD ST #201 N MIAMI BEACH FL	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>VP</b>
NAME		2.2 NAME	<b>Daniel Perez D</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>3118 N.W. 99 PL</b>
CITY - ST - ZIP		2.4 CITY - ST - ZIP	<b>Miami FL 33178</b>
TITLE <b>S</b>	<b>ANDRES, PEREZ D.</b> 3909 N.E. 163RD ST #201 N MIAMI BEACH FL	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>S</b>
NAME		3.2 NAME	<b>Andres Perez D</b>
STREET ADDRESS		3.3 STREET ADDRESS	<b>3118 N.W. 99 PL</b>
CITY - ST - ZIP		3.4 CITY - ST - ZIP	<b>Miami FL 33178</b>
TITLE <b>D</b>	<b>PEREZ, DANIEL, JR.</b> 3909 N.E. 163RD ST #201 N MIAMI BEACH FL	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>D</b>
NAME		4.2 NAME	<b>PEREZ, Daniel JR</b>
STREET ADDRESS		4.3 STREET ADDRESS	<b>3118 N.W. 99 PL</b>
CITY - ST - ZIP		4.4 CITY - ST - ZIP	<b>Miami FL 33178</b>
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

**REMITTED BY MAY 1**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **Daniel Perez JR (309) 994-7677**