

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000059292

FILED
May 01, 2008
Secretary of State

Entity Name: CAPITAN MANNY, INC.

Current Principal Place of Business:

3600 NE 170TH ST
SUITE 401
NORTH MIAMI BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

3600 NE 170TH ST
SUITE 401
NORTH MIAMI BEACH, FL 33160 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARCA KIREL, MANUEL
3600 NE 170TH ST
SUITE 401
NORTH MIAMI BEACH, FL 33160 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FARCA KIREL, MANUEL
Address: 3600 NE 170TH ST SUITE 401
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

Title: D () Delete
Name: FARCA FARCA, JOSE
Address: 3600 NE 170TH ST SUITE 401
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

Title: D () Delete
Name: FARCA FARCA, REBECA
Address: 3600 NE 170TH ST SUITE 401
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

Title: D () Delete
Name: FARCA DE KAHAN, MOSSY
Address: 3600 NE 170TH ST SUITE 401
City-St-Zip: NORTH MIAMI BEACH, FL 33160 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

I hereby certify that the information supplied with this filing does not qualify 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: MANUEL FARCA KIREL

D

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date