

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 666562

Entity Name: CAPISLE PROPERTIES INC.

Current Principal Place of Business:

405 LEXINGTON AVENUE
11TH FLOOR
NEW YORK, NY 10174

Current Mailing Address:

405 LEXINGTON AVENUE
11TH FLOOR
NEW YORK, NY 10174 US

FEI Number: 13-3036202

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PD
Name DURUZ, NICOLAS PD
Address 405 LEXINGTON AVE, 11 FLOOR
City-State-Zip: NEW YORK NY 10174

I hereby 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 all other like empowered.

SIGNATURE: DURUZ , NICOLAS PD

PRESIDENT, DIRECTOR

01/14/2014

Electronic Signature of Signing Officer/Director Detail

Date