

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000067306

**Entity Name:** CAPRICHO 2011 CORP

**Current Principal Place of Business:**

16425 COLLINS AVE  
1215  
SUNNY ISLES BEACH , FL 33160

**Current Mailing Address:**

16425 COLLINS AVE  
1215  
SUNNY ISLES BEACH , FL 33160 US

**FEI Number:** 80-0745801

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BRUTTI, SILVIA B  
16425 COLLINS AVE  
1215  
SUNNY ISLES BEACH , FL 33160 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 P  
Name PEREZ MUNOZ, FRANCISCO OMAR  
Address 16425 COLLINS AVE  
1215  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title VP  
Name BRUTTI, SILVIA BEATRIZ  
Address 16425 COLLINS AVE  
1215  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title TREASURER  
Name PEREZ MUNOZ, ALANA YAMILA  
Address 16425 COLLINS AVE  
1215  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title TREASURER  
Name PEREZ MUNOZ, AXEL FRANCISCO  
Address 16425 COLLINS AVE  
1215  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title SECRETARY  
Name PEREZ MUNOZ, AINHOA  
Address 16425 COLLINS AVE  
1215  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** FRANCISCO OMAR PEREZ MUNOZ

P

03/11/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date