

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## TEVISEC ANNUAL AUDITED REPORT **FORM X-17A-5** PART III

OMB APPROVAL

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Information Required of l Securities Exchan	Brokers and Dealer ge Act of 1934 and	s Pursuant to Sec Rule 17a-5 There	tion I of under 1998	the 2003
REPORT FOR THE PERIOD BEGINNING 1,		AND ENDING_	12/31/	/ ·
A. REGI	STRANT IDENTIF	ICATION		
NAME OF BROKER-DEALER:			OF	FICIAL USE ONLY
ADDRESS OF PRINCIPAL PLACE OF BUSINESS: (Do not use P.O. Box No.)				FIRM I.D. NO.
2121 Ponce De Leon Blvd.,	Suite #340 (No. and Street)			ROCESSED
Coral Gables	Florida		33134	MAY 0 6 2003
(City) NAME AND TELEPHONE NUMBER OF PER	(State)	REGARD TO THIS	(Zip Code)	THOMSON FINANCIAL
			(Area Co	de – Telephone Number
B. ACCO	UNTANT IDENTII	FICATION		
INDEPENDENT PUBLIC ACCOUNTANT wh	ose opinion is contained	l in this Report*		

Bauknight Pietras & Sto	ormer, P.A.		
	(Name - if individual, state last, first, midd	lle name)	
1517 Gervais Street	Columbia	sc	29201
(Address)	(City)	(State)	(Zip Code)
CHECK ONE:			

Certified Public Accountant

☐ Public Accountant

Accountant not resident in United States or any of its possessions.

FOR OFFICIAL USE ONLY

\*Claims for exemption from the requirement that the annual report be covered by the opinion of an independent public accountant must be supported by a statement of facts and circumstances relied on as the basis for the exemption. See Section 240.17a-5(e)(2)

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## OATH OR AFFIRMATION

I, Robert J. Escobio	, swear (or affirm) that, to the best of
my knowledge and belief the accompanying financial s	statement and supporting schedules pertaining to the firm of
Capital Investment Services,	Inc. , as
of <u>December 31</u> ,	, 20 <u>02</u> , are true and correct. I further swear (or affirm) that
neither the company nor any partner, proprietor, prince classified solely as that of a customer, except as follow.  No exceptions	cipal officer or director has any proprietary interest in any account ws:
SUSAN ESCOBIO SHOTARTI SI MY Comm Exp. 11/12/04 No. CC 963731	Signature President
This report ** contains (check all applicable boxes):  (a) Facing Page.  (b) Statement of Financial Condition.	Title
(c) Statement of Income (Loss).	
Computation for Determination of the Reserve  (k) A Reconciliation between the audited and una consolidation.  (l) An Oath or Affirmation.  (m) A copy of the SIPC Supplemental Report.	or Partners' or Sole Proprietors' Capital.  ated to Claims of Creditors.  equirements Pursuant to Rule 15c3-3.

<sup>\*\*</sup>For conditions of confidential treatment of certain portions of this filing, see section 240.17a-5(e)(3).



## CAPITAL INVESTMENT SERVICES, INC. MEMBER NASD NFA SIPC

2121 Ponce De Leon Blvd., Suite 340 Coral Gables, Florida 33134

Telephone: (305) 446-4800

Fax: (305) 446-4448

E-mail: CISintr@netscape.net

April 24, 2003

NASD Regulations, Inc.
Attn: Mr. Jeffery Ellis
Compliance Examiner
One Securities Centre, Suite 500
3490 Piedmont Road, NE
Atlanta, GA 30305-4808

Dear Mr. Ellis:

In response to your letter dated April 14, 2003, attached please find the revised computation of net capital which includes a reconciliation between the net capital as reported on the original 4<sup>th</sup> quarter FOCUS report and the amended 4<sup>th</sup> quarter FOCUS report, as filed by the company.

Copies have been forwarded according to your instructions.

Sincerely,

Robert Escobio

President

Cc: SEC Regional Office

SEC Washington Office (2 copies)