## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED **DOCUMENT # P04000014688** 05 SEP 22 PH 4: 16 1. Entity Name CASSANDRA PROPERTIES, INC. Principal Place of Business Mailing Address 2621 MILTON AVENUE 2621 MILTON AVENUE KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 03072005 CR2E034 (10/03) Chg-P City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SILVER, IRA S Street Address (P.O. Box Number is Not Acceptable) 108 S. MIAMI AVENUE SECOND FLOOR MIAMI, FL 33130 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered egent. SIGNATURE. Signature, typed or printed rights of registered agent and title if applicable, (MOTE: Registered Agent signesure required when reinstating) DATE \$5.00 May Be Added to Fees FILE NOW!!!- FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10.; 11. ☐ Delete MUE TITLE ☐ Change CAMACHO, RUBEN NAME NAME STREET ADDRESS 2621 MILTON AVENUE STREET ADDRESS KISSIMMEE, FL 34741 CITY-ST-ZIP CITY-ST-ZIP TITLE Oeless TITLE ☐ Change ☐ Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MUE D Detete TITLE □ Change ☐ Addition NAME NAME STREET ADMINESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delets TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-51-23 C11Y-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NUMB STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP ☐ Change Addition TITLE ☐ Defate TITLE NAME " NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP .T 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Rorida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: ATURE AND TYPED OR PAINTED HAME OF EIDHING OFFICER OR DIRECTOR Daytime Phone #

03-10-2005 90145 040 \*\*\*150.00 P04000014688



## Ruben Camacho 2621 Milton Ave Kissimmee, Fl 34741

September 20, 2005

RE: Cassandra Properties, Inc. Doc # P04000014688

Dear Madam or Sirs,

We looked on the internet and noticed that our corporation referenced above had been dissolved. We called and talked with a representative at your office and he said to send in a copy of the original form along with this letter stating that we had not received any additional information from you.

We do not need a federal ID# at this time and we did not receive a notice from you concerning the need to include a federal ID#. Included is a copy of the check we used to pay the annual fee which you still have. Please reinstate our corporation at this time.

Thank you

Ruben Camacho