

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000105276

FILED  
Jan 29, 2012  
Secretary of State

**Entity Name:** CASTLEROCK CONSULTING GROUP, INC.

**Current Principal Place of Business:**

2411 ARAGON BLVD., UNIT 2  
SUNRISE, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

2411 ARAGON BLVD., UNIT 2  
SUNRISE, FL 33322

**New Mailing Address:**

FEI Number: 61-1541346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CASTRO, HECTOR D.  
2411 ARAGON BLVD., UNIT 2  
SUNRISE, FL 33322 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CASTRO, HECTOR D.  
Address: 2411 ARAGON BLVD., UNIT 2  
City-St-Zip: SUNRISE, FL 33322

Title: D  
Name: CASTRO, KATHLEEN F.  
Address: 2411 ARAGON BLVD., UNIT 2  
City-St-Zip: SUNRISE, FL 33322

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: HECTOR D. CASTRO

D

01/29/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date