

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000043157

**Entity Name:** CASTELLON SERVICES CORP.

**Current Principal Place of Business:**

6165 WEST 22 CT  
SUITE#101  
HIALEAH, FL 33016

**Current Mailing Address:**

6165 WEST 22 CT  
SUITE #101  
HIALEAH, FL 33016 US

**FEI Number:** 81-5473859

**Certificate of Status Desired:** No

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

CASTELLON, CARLOS SR.  
14600 NW 112 AV  
HIALEAH, FL 33018 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:** CARLOS CASTELLON

04/30/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                         |                 |                         |
|-----------------|-------------------------|-----------------|-------------------------|
| Title           | P                       | Title           | DIRECTOR                |
| Name            | CASTELLON, CARLOS SR.   | Name            | ACUÑA, MARIA            |
| Address         | 6165 WEST 22 CT<br>#101 | Address         | 6165 WEST 22 CT<br>#101 |
| City-State-Zip: | HIALEAH FL 33016        | City-State-Zip: | HIALEAH FL 33018        |

*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:** CARLOS CASTELLON

PRESIDENT

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date