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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # 181769

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90215 048 ***150.00

1. Corporation					`	
CASTLE	HOMES INC					
I						
Principal Place of Business Mailing Address					- 1 i i i i i i i i i i i i i i i i i i	•••
1231 - 99TH STREET 666 71ST ST					,	
BAY HARBOR ISLAND FL 33154 MIAMI BEACH FL 33141					DO NOT WRITE IN THIS SPACE	
		US				
					3. Date Incorporated or Qualifed 11/20/1954	
1	No. of Design	2a. Mailing Address			4. FEI Number Applied For	
	lace of Business	 			59-0820644 Not Applica	
Suite, Apt.	# oto	Suite, Apt. #, etc.			\$8.75 Additional	
· ·	#, etc.	27			5. Certificate of Status Desired Fee Required	' I
City & Stat		City & State			6 Floation Compaign Financing \$5.00 May Bo	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Countr	у	8. This corporation owes the current year intangible	
24	25	29	30	•	Personal Property Tax. XYes \(\text{No} \)	ļ
	9. Name and Address of Curre				10. Name and Address of New Registered Agent	
			8	1 Name		
	rson, gary R., cpa		8:	2 Stroot Add	dress (P.O. Box Number is Not Acceptable)	
666	71ST STREET		0.	Sileet Aud	diess (f. O. Box Number is Not Acceptable)	- }
MIAMI BEACH FL 33141			8:	3		
			Ļ	4 0"	85 Zip Code	
			8	4 City	FL 85 Zip Code	
11. Pursuant	to the associations of Continue 607 OE	02 1 COZ 1 COB Florido Statut	les the abo		rporation submits this statement for the purpose of changing its registered	ıd
	to the provisions or sections our lost	uz and 607. ISU8, Florida Statut	ies, ilie avv	ve-nameo corp		iu
l office or r	registered agent, or both, in the State	of Florida. Such change was a	sutnorizea d	v tne corporati	tion's board of directors. I hereby accept the appointment as registered	
office or r agent. I a	registered agent, or both, in the State am familiar with, and accept the obligations.	of Florida. Such change was a	sutnorizea d	v tne corporati	tion's board of directors. I hereby accept the appointment as registered	
l office or r	registered agent, or both, in the State	e of Florida. Such change was a ations of, Section 607.0505, Flo	orida Statute	y tne corporati s.	ned when reinstating) DATE	ļ
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 7