CR2E003 (10/02)

UN	IFORM BUSINE	SS REPOR		
DOCUMENT # A9800001801 1. Entity Name CASTLE TWO, LTD.				
Principal Plac 12550 BISCAY NORTH MIAMI	ce of Business NE BLVD SUITE 215 FL 33181	Mailing Address 12550 BISCAYNE BLVD., S NORTH MIAMI FL 33181	UITE 215	O3 APR 15 AM 8: 20
2. Principal P	Place of Business	3. Mailing Address		L IOUREN LOIR LOIR LOIR LOIR LOIN BEIN BEIN BEIN BEIN BOIN ACOUNT HER LONN ERGE HAN FER
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DUE BY MAY 1, 2003
City & Stat	de .	City & State		4. FEI Number 65-0857959 Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current I	Registered Agent	_	7. Name and Address of New Registered Agent
CDEEN D	PATRICIA K		Name	,
	SEUM TOWER		Street Addres	s (P.O. Box Number is Not Acceptable)
	FLAGLER STREET			
MIAMI FL				
			City	FL Zip Code
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office or regis	tered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE			<u>-</u>	· · · · · · · · · · · · · · · · · · ·
9. Capital Co	Signature, typed or printed name of registered agent a		· · · · · · · · · · · · · · · · · · ·	DATE
			al Contributions La	/ 14 \$88VE CHECK DAVADLE TO EL NEDY DE CTATE
as Shown	200	10. Amount of Capita in FLORIDA to da		11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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as Shown	A GENERAL PARTNER T NOTE: General Partners MA	in FLORIDA to da HAT IS A BUSINESS EN Y NOT be changed on th	ate. TITY MUST BE REGINE form; an amendment	SEE REVERSE SIDE FOR FEE INFORMATION STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.
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SIGNATURE:

SIGNATURE REQUIRES A SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER