

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 03, 2006 08:00 AM
Secretary of State

DOCUMENT # F30463		
1. Entity Name BETANCOURT, CASTELLON ASSOCIATES, INC.		
Principal Place of Business 7765 SW 87TH AVE SUITE 200 MIAMI, FL 33173 US		Mailing Address 7765 SW 87TH AVE SUITE 200 MIAMI, FL 33173 US
DO NOT WRITE IN THIS SPACE		
		 03292006 No Chg-P CRZE034 (11/05)
4. FEI Number 59-2099895		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent BETANCOURT, RAMIRO A 7765 SW 87TH AVE SUITE 200 MIAMI, FL 33173		DO NOT WRITE IN THIS SPACE
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 agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees 000000483585 04/18/06-80022-012 150.00
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BETANCOURT, RAMIRO 6611 S.W. 98TH ST. MIAMI, FL 0,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST CASTELLON, ALBERT. 9403 SW 100TH ST. MIAMI, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida 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: 		3-29-2006 (305) 598-2932 Date Daytime Phone #