

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000088587

**FILED**  
**Jan 26, 2009**  
**Secretary of State**

**Entity Name:** CASTILFORTI LLC

**Current Principal Place of Business:**

144 CHILEAN AVE.  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

144 CHILEAN AVE.  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 74-3135758      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ADWAR, RENEE ESQ.  
848 BRICKELL AVENUE, SUITE 830  
MIAMI, FL 33131 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: IZQUIERDO, JOSE M  
Address: 144 CHILEAN AVE.  
City-St-Zip: PALM BEACH, FL 33480

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSE M. IZQUIERDO      MGR      01/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date