FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91162 036 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

90130164

DOCUMENT # N02000000012

1. Entity Name
CRUZ CASTILLO CONSULTING, INC.

Principal Place of Business	Mailing Address
3501 WEST VINE STREET 258 KISSIMMEE, FL 34741	3501 WEST VINE STREET 258 KISSIMMEE, FL 34741

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
1107 W MABBETTE ST.	1107 W MABBETTE ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: KISSIMMEE, FL	City & State: KISSIMMEE, FL
Zip: 34741 Country: USA	Zip: 34741 Country: USA

4. FEI Number: 01-0618860 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CASTILLO, CRUZ E 3501 WEST VINE STREET 258 KISSIMMEE, FL 34741	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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: Cruz Castillo CRUZ E CASTILLO 4.30.03
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when designated) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CASTILLO, CRUZ E 365 BUTTONWOOD DRIVE KISSIMMEE, FL 34743	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEER-WILLIAMS, AUDREY 1620 COLUMBIA ARMS CIRCLE, APT. 206 KISSIMMEE, FL 34741	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEER- WILLIAMS, AUDREY 2415 MARCASITE LOOP KISSIMMEE, FL 34743	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D QUEVEDO, JOSE A 365 BUTTONWOOD DRIVE KISSIMMEE, FL 34743	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E037 (10/02)

12. 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with sufficient like empowered.

SIGNATURE: Cruz Castillo CRUZ E CASTILLO 4.30.03 407-343-0777 407-343-077
SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR Date Daytime Phone #