

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000006648

**FILED**  
**Feb 16, 2005**  
**Secretary of State**

**Entity Name:** CANASTILLA EL ENCANTO, INC.

**Current Principal Place of Business:**

2517 NORTH DIXIE HIGHWAY  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

2517 NORTH DIXIE HIGHWAY  
LAKE WORTH, FL 33460

**New Mailing Address:**

FEI Number: 65-1066783

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CELIS, ZAYDA  
2517 NORTH DIXIE HIGHWAY  
LAKE WORTH, FL 33460 US

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

FLORES, REINA J  
86 BAYTREE CIRCLE  
BOYNTON BEACH, FL 33436 US

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: REINA J FLORES

02/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CELIS, ZAYDA  
Address: 5885 RAMBLE ROSE WAY  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: FLORES, REINA J  
Address: 86 BAYTREE CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VPD ( ) Change (X) Addition  
Name: FLORES, JAIME G  
Address: 86 BAYTREE CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REINA FLORES

PD

02/16/2005

Electronic Signature of Signing Officer or Director

Date