## **2008 FOR PROFIT CORPORATION**

## **FILED** ) AN te

ANNUAL REPORT				_ Jan 28, 2008 08:00
DOCUMENT # P01000042394  1. Entity Name CASTILLO STRUCTURE CORP.				Jan 28, 2008 08:00 Secretary of Sta
1	ce of Business	Mailing Address		
3126 NW 23 AVE 3126 NW 23 AVE MIAMI, FL 33142 MIAMI, FL 33142				
				1 3
DO NOT WRITE IN THIS SPA			CE	01232008 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For
			107312 W. S.W.	65-1105286 Not Applicable  5 Cartificate of Status Desired
	6. Name and Address of Current Re	Markana da		5. Certificate of Status Desired Fee Required
CASTILLO, ELICEO				DO NOT WRITE
3126 NW 23 AVE MIAMI, FL 33142				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 Signature, typed or printed name of registered agent and title of applicable (NOTE: Registered Agent signature required when reinstating)  DATE				
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Final Trust Fund Contribution.	~ _ +	.00 May Be ded to Fees
10. TITLE	OFFICERS AND DI	RECTORS		
NAME STREET ADDRESS	CASTILLO, ELICEO 3126 NW 23 AVE			77. Yaki 4. SU00000801092 🚭 🖫 🖫
CITY-ST-ZIP	MIAMI, FL 33142			######################################
TITLE NAME			7.992	
STREET ADDRESS CITY-ST-ZIP				
TITLE NAME			227 1 104 80% 15 1-15 TO 16 Sec.	
STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
TITLE NAME				IN THIS SPACE
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CITY-ST-ZIP		• ——:	"是"是"公理"	THE TENED OF THE PARTY OF THE P

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:

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daylime Phone #