

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000109574

**FILED**  
**May 02, 2005**  
**Secretary of State**

**Entity Name:** REINALDO CASTELLANOS, P.A.

**Current Principal Place of Business:**

115 CALABRIA AVENUE  
SUITE 7  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

8603 SOUTH DIXIE HIGHWAY  
SUITE 303-A  
PINECREST, FL 33143

**Current Mailing Address:**

115 CALABRIA AVENUE  
SUITE 7  
CORAL GABLES, FL 33134

**New Mailing Address:**

11234 SW 64 LANE  
MIAMI, FL 33173

**FEI Number:** 05-0535596

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASTELLANOS, REINALDO  
115 CALABRIA AVENUE  
SUITE 7  
CORAL GABLES, FL 33134 US

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

CASTELLANOS, REINALDO  
11234 SW 64 LANE  
MIAMI, FL 33173 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: REINALDO CASTELLANOS

05/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CASTELLANOS, REINALDO  
Address: 115 CALABRIA AVENUE, SUITE 7  
City-St-Zip: CORAL GABLES, FL 33134

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

Title: PD (X) Change ( ) Addition  
Name: CASTELLANOS, REINALDO  
Address: 11234 SW 64 LANE  
City-St-Zip: MIAMI, FL 33173

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: REINALDO CASTELLANOS

MR.

05/02/2005

Electronic Signature of Signing Officer or Director

Date