## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000006169

20 S SHORE DRIVE # 2

MIAMI BEACH, FL 33141

Address: City-St-Zip:

**FILED** Mar 03, 2005 Secretary of State

Entity Name: CASTRO INVESTMENT COMPANY **Current Principal Place of Business: New Principal Place of Business:** 20 S SHORE DRIVE APT 2 MIAMI BEACH, FL 33141 **Current Mailing Address: New Mailing Address:** 20 S SHORE DRIVE APT 2 MIAMI BEACH, FL 33141 FEI Number: 20-0436895 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PORTUONDO, FERNANDO J ESQ 'PORTUONDO, FERNANDO J ESQ 2121 PONCE DE LEON BLVD 2121 PONCE DE LEON BLVD SUITE 600 SUITE 600 CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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: FERNANDO PORTUOND 03/03/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition CASTRO URZUA, FRANCISCO J Name: Name: 20 S SHORE DRIVE APT 2 Address: Address: City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: Title: ٧S Title: ( ) Delete () Change () Addition Name: LUSARDI, CLAUDIA GEMMA T Name: 20 S SHORE DRIVE APT 2 Address: Address: MIAMI BEACH, FL 33141 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition CASTRO-TOLEDO, DIEGO Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: FRANCISCO CASTRO URZUA PT 03/03/2005