## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000049244

Entity Name: CASTEL GRANDE CORPORATIO

FILED Apr 21, 2005 Secretary of State

Entity Name: CASTELGRANDE CORPORATION				
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
2805 KINSI WESTON,	GNTON CIRCLE FL 33332			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
2805 KINSI WESTON,	GNTON CIRCLE FL 33332			
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address o	Name and Address of New Registered Agent:	
CIFUENTES, MARIA 1580 SAWGRASS CORP. PKWY. SUITE 130 SUNRISE, FL 33323 US		CIFUENTES, MARIA 4300 BISCAYNE BOUI SUITE 204 MIAMI, FL 33137 US	4300 BISCAYNE BOULEVARD SUITE 204	
The above in the State	named entity submits this statement for the of Florida.	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: MARIA CIFUENTES		04/21/2005	
	Electronic Signature of Registered Ag	gent	Date	
Election Can	npaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete RUSSO MARTINEZ, GIUSEPPINA 2805 KINSINGTON CIRCLE WESTON, FL 33332	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () Delete MARTINEZ DE RUSSO, MARIA 2805 KINSINGTON CIRCLE WESTON, FL 33332	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () Delete RUSSO, FRANCESCO 2805 KINSIGNTON CIRCLE WESTON, FL 33332	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	T () Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: GIUSEPPINA RUSSO P 04/21/2005

RUSSO MARTINEZ, FRANCESCA

2805 KINSIGNTON CIRCLE

WESTON, FL 33332

Name:

Address:

City-St-Zip: