FILED May 02, 2005 08:00 AN Secretary of State

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # P03000155823 1. Entity Name | | | | | | | | | |
|--|---|---|---------------------|--|----------------------------|--|--------------|-----------------------------------|--|
| CASTILLO SERVICES | S INC | | | | | | | | |
| DO NOT WRITE IN THIS SPACE | | | | | | | | | |
| 2. Principal Place of | 3. Mailing Address | | | 1 | | | | | |
| 7875 GRAND CANAL DR Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | |
| City & State | | City & State | | | 4. FEI Number Applied For | | | | |
| MIAMI, FL | MIAMI, FL | | | | 20-0502728 | | | Not Applicable | |
| Zip 33144 - | Country | Zip | Cc | ountry | 5. Certifica | ate of Status Desired | | \$8.75 Additional Fee Required | |
| | | | | | ne and Add | ress of Current R | egister | | |
| | Name CASTILLO, A | | | FONSO | | | | | |
| | DO NOT WI | | Street Add | | | ress (P.O. Box Number is Not Acceptable) | | | |
| 1 | ACE | 7875 GRAND CANAL D | | | | | | | |
| | | | | City | | - | | Zip Code | |
| | | | | MIAMÍ | | | L | 33144 | |
| 8. The above named State of Florida. | l entity submits this sta am familiar with and a | tement for the purpos accept the obligations | e of cn of regi: | ianging its regis stered agent. | stered office | or registered ager | it, or bo | th, in the | |
| SIGNATURE | AUNIVU | CASTILI | .O. AL | FONSO, PRES | IDENT | | | 4/21/2005 | |
| Signatu | ure, typed or printed name of r - May 11 Fee is \$150.0 | registered agent and title if a | pplicable | . (NOTE: Registe | ered Agent sig | nature required when reir | nstating) | DATE | |
| After Mi Amend | - Mayn Fee is \$150.0 ay 1, Fee is \$550.00 ded UBR is \$61.25 e to Florida Departme | | | , | | Campaign Financing and Contribution. | ' | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AN | D DIRECTORS | 11. | | i. Stadio spropers | | 45557555 | | |
| NAME | CASTILLO, ALFONSO | | NA | ILE ME | | | | | |
| STREET ADDRESS CITY-ST-ZIP | 7875 GRAND CANAL MIAMI,FL 33144 | . DR | | REET ADDRESS IY-ST-ZIP | | | | | |
| TITLE NAME | | | ŢίŢ | LE ME | | 05/01/18/38/18 | | | |
| STREET ADDRESS | } | rie o | ST | REET ADDRESS | | Trailer to tourn | DIVIT | | |
| CITY-ST-ZIP TITLE | | | CT TIT | Y-ST-ZIP LE | | | | | |
| NAME STREET ADDRESS | | ! | NA | ME REET ADDRESS | | | | | |
| CITY-ST-ZIP | | <u>工士。</u> | Сл | Y ST ZIP | | DO NOT | | | |
| TITLE NAME | 1 | , | TIT | 41-14-14-14-14-17-17-18-18-18-18-18-18-18-18-18-18-18-18-18- | | IN THIS | SPA | ICE | |
| STREET ADDRESS | | # | នា | REET ADDRESS | | | | | |
| CITY-ST-ZIP TITLE | | المستستست المستشنة | TIT | | | | | | |
| NAME STREET ADDRESS | | ! | NAI STI | ME REET ADDRESS | | | 机构设置 开始建筑 | | |
| CITY-ST-ZIP | | ار اعتراب در المعارب | ÇU | Y-ST-ZIP | | | | | |
| TITLE NAME | 1 | | TIT NAI | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | _ | | | REET ADDRESS Y-ST-ZIP | | | | | |
| 12. I hereby certify that the | he information supplied w | ith this filing does not qu | alify for | the exemption st | tated in Secti | on 119.07(3)(i), Florid | ia Statute | es. 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 eath; that I am an officerfor director of the corporation or the receiver or trustee empowered to execute this report as required by | | | | | | | | | |
| Chapter 607, Florida Statules; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered. | | | | | | | | | |
| SIGNATURE: | 40 CI 00 | CASTILLO, ALF | -ONSC |), PRESIDENT | | 4/21/2005 | | 223-5643 | |
| SIGNA | ごしんた インロー・ストドロ ウベナ | PRINTED NAME OF SIG | iNING (| ンドトバンとれ ひれ レル | RECION | Date | Davtim | າePhone# | |