

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000012529 1. Entity Name CASTILLO BUILDING MANAGEMENT, INC.						07 SEP 20 07 5:05 TALLAHASSEE, FLORIDA	
Principal Place of Business 7930 W 6TH AVENUE HIALEAH, FL 33014				Mailing Address 7930 W 6TH AVENUE HIALEAH, FL 33014			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number 20-2399121				Applied For <input type="checkbox"/> Not Applicable		REINSTATEMENT	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CASTILLO, FRANCISCO SR 7930 W 6TH AVENUE HIALEAH, FL 33014				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>							
FILE NOW!!! FEE IS \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CASTILLO, FRANCISCO SR 7930 W 6TH AVENUE HIALEAH, FL 33014 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000110052120 03/28/07-01023-005 **300.00		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V CASTILLO, EVANGELINA 7930 W 6TH AVENUE HIALEAH, FL 33014 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CASTILLO, FRANK JR 7930 W 6TH AVENUE HIALEAH, FL 33014 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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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: <i>Francisco Castillo</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				09/20/07 (305) 827-5723 <small>Date Daytime Phone #</small>			