

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000029400

Entity Name: ALCAST SERVICES, INC.

FILED  
Jul 28, 2008  
Secretary of State

## Current Principal Place of Business:

402 EVERWOOD DR  
KISSIMMEE, FL 34743

## New Principal Place of Business:

## Current Mailing Address:

402 EVERWOOD DR  
KISSIMMEE, FL 34743

## New Mailing Address:

FEI Number: 20-2400692

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASTELLON, MANUEL R  
402 EVERWOOD DR  
KISSIMMEE, FL 34743 US

## Name and Address of New Registered Agent:

CASTELLON, YARA  
402 EVERWOOD DR  
KISSIMMEE, FL 34743 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: YARA CASTELLON

07/28/2008

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: P ( ) Delete  
Name: CASTELLON, MANUEL R  
Address: 402 EVERWOOD DR  
City-St-Zip: KISSIMMEE, FL 34743

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CASTELLON, YARA  
Address: 402 EVERWOOD DR  
City-St-Zip: KISSIMMEE, FL 34743

Title: VP ( ) Change (X) Addition  
Name: CASTELLON, MANUEL R  
Address: 402 EVERWOOD DR  
City-St-Zip: KISSIMMEE, FL 34743

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: YARA CASTELLON

P

07/28/2008

Electronic Signature of Signing Officer or Director

Date