

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000159664

FILED
May 12, 2007
Secretary of State

Entity Name: CYBER CASTLE CORPORATION

Current Principal Place of Business:

4125 RUBY DRIVE W
JACKSONVILLE, FL 32246

New Principal Place of Business:

101 CENTURY 21 DRIVE
111
JACKSONVILLE, FL 32216 US

Current Mailing Address:

4125 RUBY DRIVE W
JACKSONVILLE, FL 32246

New Mailing Address:

101 CENTURY 21 DRIVE
111
JACKSONVILLE, FL 32216

FEI Number: 20-3899012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELA CRUZ, ALEXIS C SR.
4125 RUBY DRIVE W
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

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:

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: ONG, MARTIN C
Address: 768 BROOKVIEW DR. NORTH
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP () Delete
Name: DELA CRUZ, ALEXIS C SR.
Address: 4125 RUBY DRIVE W
City-St-Zip: JACKSONVILLE, FL 32246

Title: ST () Delete
Name: CONNER, MIRIAM L
Address: 4125 RUBY DR. WEST
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: CALLAO, DARLENE RUTH F
Address: 593 N. BACALSO AVE., MAMBALING
City-St-Zip: CEBU CITY 6000 PHILIPPINES,

Title: D () Delete
Name: FALDAS, DARYL MYLES L
Address: 593 N. BACALSO AVE., MAMBALING
City-St-Zip: CEBU CITY 6000 PHILIPPINES,

Title: D () Delete
Name: DELA CRUZ, ALEXIS C JR.
Address: 4125 RUBY DR. WEST
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ONG, MARTIN C
Address: 768 BROOKVIEW DR. NORTH
City-St-Zip: JACKSONVILLE, FL 32258

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALEXIS C. DELA CRUZ, SR.

VP

05/12/2007

Electronic Signature of Signing Officer or Director

Date