## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000023826

Entity Name: CASTILLO CONSULTING INC.

FILED Mar 13, 2009 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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7404 SW 14 COURT NORTH LAUDERDALE, FL 33068

Current Mailing Address: New Mailing Address:

256 SW KIMBALL CIR 7404 SW 14 COURT

PORT ST. LOUCIE, FL 34953 NORTH LAUDERDALE, FL 33068

FEI Number: 20-8489310 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMAS, JOSE C.P.A.

9710 STIRLING ROAD

101

COOPER CITY, FL 33024 US

CASTILLO-OLIVERA, SUSANNA
7404 SW 14TH CT
NORTH LAUDERDALE, FL 33068 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: SUSANNA CASTILLO OLIVERA 03/13/2009

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 OLIVERA, WILSON
 Name:

 Address:
 7404 SW 14 COURT
 Address:

 City-St-Zip:
 NORTH LAUDERDALE, FL 33068
 City-St-Zip:

Title: D ( ) Delete Title: VP (X) Change ( ) Addition

Name: OLIVERA, SUSANNA C Name: CASTILLO-OLIVERA, SUSANNA Address: 7404 SW 14 COURT Address: 7404 SW 14 COURT

City-St-Zip: NORTH LAUDERDALE, FL 33068 City-St-Zip: NORTH LAUDERDALE, FL 33068

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: WILSON OLIVERA P 03/13/2009