

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000067300

Entity Name: GO4CAST, INC.

FILED
Mar 31, 2010
Secretary of State

Current Principal Place of Business:

5475 NW ST. JAMES DR. SUITE 187
SUITE 187
PORT ST. LUCIE, FL 34983 US

New Principal Place of Business:

Current Mailing Address:

5475 NW ST. JAMES DR. SUITE 187
SUITE 187
PORT ST. LUCIE, FL 34983 US

New Mailing Address:

FEI Number: 26-0276043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HJORLEIFSSON, MICHELE MR
420 NE DEEP WATER COVE
SUITE 187
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

HJORLEIFSSON, MICHELE M MR
420 NE DEEP WATER COVE
SUITE 187
PORT ST. LUCIE, FL 34983 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: MICHELE HJORLEIFSSON

03/31/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: HJORLEIFSSON, MICHELE M MR
Address: 420 NE DEEP WATER COVE
City-St-Zip: PORT ST. LUCIE, FL 34983 US

Title: VP
Name: HJORLEIFSSON, MICHELE M MR
Address: 420 NE DEEP WATER COVE
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

I hereby 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 all other like empowered.

SIGNATURE: MICHELE HJORLEIFSSON

P

03/31/2010

Electronic Signature of Signing Officer or Director

Date