

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000005768

FILED
May 01, 2008
Secretary of State

Entity Name: CASTILLO & COMPANY, CPA, P.A.

Current Principal Place of Business:

2100 PONCE DE LEON BLVD
1203
CORAL GABLES, FL 33134 US

Current Mailing Address:

2100 PONCE DE LEON BLVD
1203
CORAL GABLES, FL 33134 US

FEI Number: 65-0555551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

2600 DOUGLAS ROAD
400
CORAL GABLES, FL 33134 US

New Mailing Address:

2600 DOUGLAS ROAD
400
CORAL GABLES, FL 33134 US

Name and Address of Current Registered Agent:

CASTILLO, MARTHA CPA
625 UNIVERSITY DRIVE
CORAL GABLES, FL 33134 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: D () Delete
Name: CASTILLO, MARTHA CPA
Address: 625 UNIVERSITY DRIVE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MARTHA CASTILLO

D

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date