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Jun 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000031216 (1)

1. Corporation Name
CASTLEMAN ENTERPRISES, Inc.

Principal Place of Business
3936 S. Semoran Blvd.
Orlando, Florida 32822

Mailing Address
4827 DEVORE CT.
ORLANDO, Florida
32818

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21

Suite Apt #, etc.
22

City & State
23

Zip | Country
24 | 25

2a. Mailing Address
26

Suite Apt #, etc.
27

City & State
28

Zip | Country
29 | 30

3. Date Incorporated or Qualified
4/21/95

4. FEI Number
593313759
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CASTLEMAN, DATHELL
4827 DEVORE CT.
Orlando, Florida 32822

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City | **FL** | 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
(Signature of an officer or director of the corporation) (If changing Registered Agent, Signature of Registered Agent required below, accepting)

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	CASTLEMAN, DATHELL	
STREET ADDRESS	4827 DEVORE ST.	
CITY-ST-ZIP	ORLANDO, Florida 32818	
TITLE	D	☐ DELETE
NAME	CASTLEMAN, Russell	
STREET ADDRESS	4827 DEVORE CT.	
CITY-ST-ZIP	ORLANDO, Florida 32818	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☐ Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE	900002550539	☐ Change ☐ Addition
22 NAME	-06/08/98--01018--009	
23 STREET ADDRESS	***150.00	
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

4/6/4

14. I hereby certify that the information supplied with this report does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental report is true and accurate and that my 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 in Block 12 or Block 13 if changed or added above or on an attached sheet with an address.

SIGNATURE: Dathell Castleman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/22/98
DATE

407-294-5468
Daytime Phone #

CR2E034 (10/97)