## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000077562 (3) DOCUMENT #
1. Corporation Name

ARCAST ENTERPRISES, INC.

Principal Place of Business

THE SECTION

## FILED Mar 12 1998 8:00am Secretary of State



Mailing Address 589 W. 27 ST. 8330 N.W. 166TH TERRACE HIALEAH FL 33016 MIAMI FL 33016-3444 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/10/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0612651 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CASTILLO, MARIA 8330 N.W. 166TH TERRACE Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33016** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition ☐ DELETE 1.1 TITLE TITI F CASTILLO, ARLA 1.2 NAME **8330 N.W. 166TH TERRACE** 1.3 STREET ADDRESS

NAME STREET ADDRESS **MIAMI FL 33016** CITY-ST-ZIP 1.4 CITY-ST-ZIP SVD DELETE Change Addition TITLE 2.1 TITLE CASTILLO, MARIA 2.2 NAME **8330 N.W. 166TH TERRACE** STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33016 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETÉ Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7/P DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 2000024550**32** -03/12/98--01032--003 DELETE TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** \*\*\*150.00 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 annual 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 on an attachment with an address

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