

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90096 038 ***150.00

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03282007 Chg-P CR2E034 (12/06)

DOCUMENT # P96000005499 1. Entity Name CASTLE FLORIDA BUILDING CORP.																																											
Principal Place of Business 150 N. SWINTON AVE. #100 DELRAY BEACH, FL 33444			Mailing Address 150 N. SWINTON AVE. #100 DELRAY BEACH, FL 33444																																								
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		4. FEI Number 65-0641806 Applied For <input type="checkbox"/> Not Applicable																																							
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent HASNER, RICHARD 944 GREENSWARD LANE DELRAY BEACH, FL 33445																																							
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: Richard Hasner 3-28-2007 <small>(NOTE: Registered Agent signature required when reinstating)</small> DATE																																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">P</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HASNER, RICHARD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>944 GREENSWARD LANE</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>DELRAY BEACH, FL 33445</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">STV</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HASNER, JAY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>150 N SWINTON AVE SUITE 200</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>DELRAY BEACH, FL 33444</td> <td></td> </tr> </table>		TITLE	P	<input type="checkbox"/> Delete	NAME	HASNER, RICHARD		STREET ADDRESS	944 GREENSWARD LANE		CITY- ST- ZIP	DELRAY BEACH, FL 33445		TITLE	STV	<input type="checkbox"/> Delete	NAME	HASNER, JAY		STREET ADDRESS	150 N SWINTON AVE SUITE 200		CITY- ST- ZIP	DELRAY BEACH, FL 33444		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">V</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>John Suteu</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>9731 Boca Gardens Parkway #C</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>Boca Raton, FL 33496</td> <td></td> </tr> </table>		TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME	John Suteu		STREET ADDRESS	9731 Boca Gardens Parkway #C		CITY- ST- ZIP	Boca Raton, FL 33496	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																											
SIGNATURE: Jay Hasner 3-28-07 561-272-1207 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date Daytime Phone #																																											