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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1998		Secreta DIVISION OF	ary of State CORPORA		NS	98 JUL 20 PM 2: 52			
	T TAGETTO	960000582 Consultants, in	SECRETARY OF STATE TALLAHASSEE, FLORIDA							
Principal Plac	e of Business	Mailmo	Address) 10110 11011 0		
5757 COLLINS		•								
#1201	ATCHOL		#1201							
MIAMI BEACH	I FL 33140	MIAMI	BEACH FL 33140							
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	lace of Business		r1					F		
Suite, Apt	# Afc)							
22		<u></u> ∱ ₁					5. Certificate of Status Desired			
City & State	0		& State				6. Election Campaign Financing	\$5.0	May Be	
23		28					Trust Fund Contribution	Adde	d to Fees	
Zip	Country	r			ntry					
24	25 Name and Addres		d Anent	30)					□ NO	
KU	PERSTEIN, JOAN S	ob or our one riograms	a rigotti		81	Name	10. Harris and Hearings of New York			
	57 COLLINS AVE.			<u>}</u>		· · · · · ·	72 O. D			
#12				1	62	Street Add	ress (F.O. Box Number is Not Acceptable)			
1	MI BEACH FL 33140		SECRETARY OF STATE TALL AHASSEE, FLORIDA Mailing Address Mailing Address 5737 COLUNS AVENUE #1201 MIAMI BEACH FL 33140 2a. Mailing Address 4. FEI Number 7abe							
				}	84	City		85 Zu	Code	
					_].		F <u>L</u>	<u>. </u>		
office or r	registered agent, or both	, in the State of Florida, S	uch change was	authorized	by	the corporat	poration submits this statement for the purpose of tion's board of directors. I hereby accept the ap	t changing pointment a	its registered is registered	
SIGNATURE	Signature, typed or printed harne	of regers and agent and the diapp	catre (NO	TE Hogistered	Agen	it Signature requi	red when reinstating) DATE			
12	()	FICERS AND DIRECTOR	is .	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D		DELETE	1.1 TH	ŀ					
NAME	KUPERSTEIN, JOA			ı		ſ	-07/24/98(11005-	-002	
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CITY-ST-ZiP	MIAMI BEACH FL	33140	Driete			· ZIP	7,700.00			
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NAME !				6.2 NA	ME	-	721-	$\boldsymbol{\mathcal{U}}$		
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CITY - ST - ZIP	<u> </u>			64 CH	Y-ST	- ZIP				

14. Thereby 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 reference of 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 argeliance with my address.

SIGNATURE:

C.A.S.T.L.E. Technology Consultants 5757 Collins Avenue #1201-1202 Miami Beach, Florida 33140 (305) 868-0946

Secretary of State
Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, Florida 32302-1500

To Whom It May Concern:

My corporate return is being filed late as I have been quite ill, unable to attend to any business matters. I am just returning to work after several months under intensive treatment.

I would appreciate any assistance that you can provide waiving the penalty fee. Life has not been easy and your assistance would be greatly appreciated.

Sincerely,

Joan Kuperstein