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

DOCUMENT # 1. Corporation Name CASTI FMAIN YACH P97000024256 (4)

FILED Jan 16 1998 8:00am Secretary of State

CASTLEWAIN TACTITS, INC.						
Principal Place of Business Mailing Address						1 IDBILOBI END LUIN INDIN NOVIN TOUIL BOULD DIVIN THEIR BIELD BIRH ALDI
505 SW 18 STREET 505 SW 18 STREET						
FT. LAUDERDALE FL 33315 FT. LAUDERDALE FL 33315						
					DO NOT WRITE IN THIS SPACE	
						Date Incorporated or Qualified 03/18/1997
2. Principal Place of Business 2a. Mailing Ac			Address			4. FE) Number Applied For
21		26				65-0736387 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		27				5. Cerunicate of Status Besired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip Country		Zip	¬ '			8. This corporation owes or has paid the current year Intangible
		29				Personal Property Tax due June 30, Yes No
	e and Address of Current	Registered Agent		-		10. Name and Address of New Registered Agent
BOWKER, JOSEPHINE				81	Name	•
505 SW 18 STREET				82	Street Add	dress (P.O. Box Number is Not Acceptable)
FT. LAUDERDALE FL 33315						
			83			
				84 City		85 Zip Code
					•	FL ! '
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.						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
Signature, typed or proted name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	DTELU BUDEDT	☐ DELETI	1.1	TITLE		L Change L Addition
NAME DE VERTEUIL, RUPERT			1.2	1.2 NAME		
STREET ADDRESS 505 SW 18 STREET		1,3	1,3 STREET ADDRESS			
3111 B1 Q1	UDERDALE FL 33315			CITY-S	T-ZIP	
TITLE D		☐ DELETI	2.1	TOLE		Change Addition
ſ (NS, PETER J		2.2	NAME]	
OTTICET TOURS	W 18 STREET		2,3	STREET	ADDRESS	
3711 01 24	UDERDALE FL 33315			CITY-S	ST-ZIP	
TITLE D		☐ DELETI		TITLE		Change L Addition
	ER, JOSEPHINE		3.2	NAME		
	W 18 STREET		3.3	STREET	ADDRESS	
0.77 0.7 2.8	UDERDALE FL 33315			CITY-S	T-ZIP	
TITLE		☐ DELET	4.1	TITLE	-	Change Li Addition
NAME			4. 2	NAME		
STREET ADDRESS			4.3	STREET	ADDRESS	
CITY-ST-ZIP			4.4	CITY-S	T-ZIP	
TITLE		☐ DELETE	5.1	TITLE		Change Addition
NAME			5.2	NAME		
STREET ADORESS			5.3	STREET	ADDRESS	
CITY - ST - ZIP			5.4	CITY-S	T- ZIP	
TITLE		DELETI	6.1	TITLE		Change Addition
NAME .			6.2	NAME		
STREET AODRESS			6.3	STREET	ADDRESS	
CITY-ST-ZIP 6.4 CITY				CITY-S'	r-zip	
	the information supplied with	this filing does not que				Section 119.07(3)(i), Florida Statutes, I further certify that the information

Interest certify that the miorification supplied with this filing does not quality for the exemption stated in Section 1.18.07(3)(i), Florida Statutes. Fluther certify that the intollated indicated on this annual report or suppliemental 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.