

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

**FILED**  
**Feb 06 1998 8:00am**  
**Secretary of State**

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P97000056562 (6)**  
 1. Corporation Name  
**CASTCO HOLDING CORP.**



Principal Place of Business <b>901 PONCE DE LEON BLVD STE 501 CORAL GABLES FL 33134</b>	Mailing Address <b>901 PONCE DE LEON BLVD STE 501 CORAL GABLES FL 33134</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>06/21/1997</b>		4. FEI Number <b>65-0763387</b>		Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip	5. Certificate of Status Desired <input type="checkbox"/>	8.75 Additional Fee Required		
24. Country		29. Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
25. Country		30. Country		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>IRIONDO, ANDRES J 901 PONCE DE LEON BLVD STE 501 CORAL GABLES FL 33134</b>				10. Name and Address of New Registered Agent	
81. Name				82. Street Address (P.O. Box Number is Not Acceptable)	
83.				84. City	
				85. Zip Code <b>FL</b>	

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 *Andres J. Iriondo* **ANDRES J. IRIONDO** DATE **1/28/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D, P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>D CASTILLO, ANA B. 28-03</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>CASTILLO, FRANCISCO SR</b>	1.2 NAME	<b>3A AVENIDA 28-03 ZONA 2</b>
STREET ADDRESS	<b>7A AVENIDA 5-10 ZONA 4</b>	1.3 STREET ADDRESS	<b>GUATEMALA GUATEMALA</b>
CITY-ST-ZIP	<b>GUATEMALA GUATEMALA</b>	1.4 CITY-ST-ZIP	
TITLE	<b>D, V.P.</b> <input type="checkbox"/> DELETE	2.1 TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>CASTILLO, FRANCISCO JR</b>	2.2 NAME	<b>CASTILLO, Ruby M.</b>
STREET ADDRESS	<b>7A AVENIDA 5-10 ZONA 4</b>	2.3 STREET ADDRESS	<b>3A AVENIDA 28-03 ZONA 2</b>
CITY-ST-ZIP	<b>GUATEMALA GUATEMALA</b>	2.4 CITY-ST-ZIP	<b>Guatemala, Guatemala</b>
TITLE	<b>D, S</b> <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	<b>CASTILLO, JUAN C</b>	3.2 NAME	
STREET ADDRESS	<b>3A AVENIDA 28-40 ZONA 2</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>GUATEMALA GUATEMALA</b>	3.4 CITY-ST-ZIP	
TITLE	<b>D, T</b> <input type="checkbox"/> DELETE	4.1 TITLE	
NAME	<b>CASTILLO, ANA M</b>	4.2 NAME	
STREET ADDRESS	<b>3A AVENIDA 28-40 ZONA 2</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>GUATEMALA GUATEMALA</b>	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE *Francisco Castillo Sr* **FRANCISCO CASTILLO SR 1-28-98 305-445-0611**

CR2E034 (10/97)