## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000071401

Address:

City-St-Zip:

P.O. BOX 24567

TAMPA, FL 33623

FILED Apr 22, 2009 Secretary of State

Entity Na	me: CAST-C	RETE CORPORATION			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6324 COUNTY RD.,579 TAMPA, FL 33623 US				6324 COUNTY ROAD 579 SEFFNER, FL 33584 US	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX TAMPA, F					
FEI Number	: 59-3466922	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
CAREY, MICHAEL R 712 SOUTH OREGON AVENUE TAMPA, FL 33606 US				STANTON, JOHN D 6324 COUNTY ROAD 579 SEFFNER, FL 33584 US	
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: JOHN D. STANTON				04/22/2009	
	Electro	onic Signature of Registered Ag	jent	Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( STANTON, JO POST OFFIC TAMPA, FL 3	E BOX 24567	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( KARDASH, W P.O. BOX 248 TAMPA, FL 3	567	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D ( ROBB, CHAR	) Delete LES K	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: WILLIAM J. KARDASH D 04/22/2009