

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

FILED
Feb 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # P97000098509 (7)

1. Corporation Name

CASTLE GARDENS INVESTMENT, INC.

Principal Place of Business

4821 NW 22 COURT
UNIT 5, STE 206
FORT LAUDERDALE FL 33313

Mailing Address

4821 NW 22 COURT
UNIT 5, STE 206
FORT LAUDERDALE FL 33313

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/19/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 LAUDERHILL	26 LAUDERHILL
22 Suite, Apt. #, etc. 2040 NW 47 TERR.	27 Suite, Apt. #, etc. 2040 NW 47 TERR.
23 City & State FLORIDA	28 City & State FLORIDA
24 Zip 33313	29 Country US
25 Country US	30 Zip 33313
26 Country US	31 Zip 33313

2a. Mailing Address	2b. Mailing Address
26 LAUDERHILL	27 LAUDERHILL
27 Suite, Apt. #, etc. 2040 NW 47 TERR.	28 Suite, Apt. #, etc. 2040 NW 47 TERR.
28 City & State FLORIDA	29 City & State FLORIDA
29 Zip 33313	30 Country USA
30 Country USA	31 Zip 33313

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name	BORCHERS, NANCY
82 Street Address (P.O. Box Number is Not Acceptable)	2040 NW 47 TERR.
83	
84 City	LAUDERHILL
85 Zip Code	33313

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

Nancy Borchers

Signature, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

01-09-1998

12. OFFICERS AND DIRECTORS	
TITLE	PSTD
NAME	BORCHERS, NANCY E
STREET ADDRESS	4821 NW 22 CT, UNIT 5, STE 206
CITY - ST - ZIP	FORT LAUDERDALE FL 33313
TITLE	HARRY PRZYBYLLA
NAME	4821 NW 22 CT UNIT 5
STREET ADDRESS	APT. 206, FORT LAUDERDALE
CITY - ST - ZIP	33313
TITLE	VICE PRESIDENT
NAME	HARRY PRZYBYLLA
STREET ADDRESS	4821 NW 22 CT UNIT 5
CITY - ST - ZIP	APT. 206, FORT LAUDERDALE
TITLE	FL - 33313
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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:

Nancy Borchers

01.09.1998

6779699

CR2E034 (10/97)