

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

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90022 028 ***150.00

DOCUMENT # ~~11550000~~ (6)
Corporation Name P98000009653
CASDAS INC ✓



Principal Place of Business
13569 DEER CREEK DR.
Palm Bch Gardens FL.
33418

Mailing Address
P.O. Box 50253
Lighthouse Point FL.
33074

DO NOT WRITE IN THIS SPACE

1. Principal Place of Business <u>13569 DEER CREEK DR.</u>		2a. Mailing Address <u>P.O. Box 50253</u>		3. Date Incorporated or Qualified <u>01-29-98</u>	
Suite, Apt. #, etc. <u>PALM Bch. GARDENS</u>		Suite, Apt. #, etc.		4. FEI Number <u>65-0809386</u>	
City & State <u>Florida</u>		City & State <u>Lighthouse Point FL.</u>		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Zip <u>33418</u>		Zip <u>33074</u>		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Country		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent <u>Arturo Ayala</u> <u>13569 DEER CREEK DR.</u> <u>Palm Bch. GARDENS FL. 33418</u>				10. Name and Address of New Registered Agent	
81 Name				85 Zip Code	
82 Street Address (P.O. Box Number is Not Acceptable)				FL	
83					
84 City					

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		DATE	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
☐ DELETE		☐ Change ☐ Addition	
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP		☐ Change ☐ Addition	
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP		☐ Change ☐ Addition	
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP		☐ Change ☐ Addition	
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP		☐ Change ☐ Addition	
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP		☐ Change ☐ Addition	
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP		☐ Change ☐ Addition	

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

Arturo Ayala 04-15-99