## 2000 UNIFORM BUSINESS REPORT (UBR)

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## **FILED** DOCUMENT # **P99000018328** Apr 21, 2000 8:00 am Secretary of State 1. Entity Name CASTACO, INC. 04-21-2000 90119 040 \*\*\*150.00 Mailing Address Principal Place of Business 478 E. ALTAMONTE DRIVE #140 478 E. ALTAMONTE DRIVE #140 ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS FL 32701-4628 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 59-3559005 \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent AMPARS A .- DE MARTINEZ MARTINEZ, FERNANDO Street Address (P.O. Box Number is Not Acceptable) 375 PALM SPRINGS DR.# 304 375 PALM SPRINGS DRIVE #140 **ALTAMONTE SPRINGS FL 32701** ALTAMONTE SPRINGS, 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE (NOTE, Registered Agent signature required when reinstating) Signature, typ d title if applicable 9. This corporation is eligible to satisfy its in FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Change ☐ Delete TITLE PRESIDENT TITLE MARTINEZ, FERNANDO NAME AMPARO A. DE MARTINEZ STREET ADDRESS STREET ADDRESS 375 PALM SPRINGS DRIVE #304 375 PALM SPRINGS DR # 304 CITY-ST-ZIP CITY-ST-ZIP ALTAMONTE SPRINGS, FL. 32701 **ALTAMONTE SPRINGS FL 32701** GENERAL OPERATOR VISE\_PRESTBENT Addition TITLE Delete NAME ARANGO, AMPARO NAME DANIEL F. ACEVEDO STREET ADDRESS STREET ADDRESS 375 PALM SPRINGS DRIVE #304 375 PALM SPRINGS DR.# 304 CITY-ST-ZIP CITY-ST-ZIP ALTAMONTE SPRINGS, FL. 32701 **ALTAMONTE SPRINGS FL 32701** REGIONAL VISE-PRESIDENT $\Box$ Change ☐ Addition TITLE ☐ Delete FRANCISCO A. MARTINEZ NAME NAME STREET ADDRESS 13901 N.W. 4th ST # 102 F STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES, FL. 33028 REGIONAL VISE-PRESIDENT Change ☐ Delete TITLE TITLE FERNANDO MARTINEZ NAME. CALLE 13 Oe # 2-80(101) STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CALI, COLOMBIA. (S.A) ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Daytime Phone #