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

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # S5248

(2)

Mailing Address

CARLOS ALBERTO CASTRO, P.A.

FILED
May 01 1998 8:00am
Secretary of State

1001 S. BAYS SUITE 2410		1001 S. BAYSHORE DR. SUITE 2410		DO ALOT MIDITE IN THIS SE	DO NOT WIDITS IN THE ODAOS				
MIAMI FL 331	131	MIAMI FL 33131		DO NOT WRITE IN THIS SE  3. Date Incorporated or Qualified	ACE				
				05/14/1991					
	lace of Business	2a. Mailing Address		4, FEI Number	Applied For				
	Brickell Avenue	26 1200 BRICKO	M Ave	∩UQ 65-0302497	Not Applicable				
Suite, Apt. 22 91 (C	1440	Suite, Api. #, etc. 27 Suite 1446	٥	5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be				
23 <u>HIQ</u>		28 Miami, FC	Country	Trust Fund Contribution	Added to Fees				
Zip 24 3313	Country	29 33 13 1	n ´	8. This corporation owes or has paid the curre Personal Property Tax due June 30.	int year Intangible Yes \[ \sum \] No				
24 30 10	2. Name and Address of Current	1 1	<u>'</u>	10. Name and Address of New Registered Ag					
CA	STRO, CARLOS A.		81 Name						
	D1 <b>S.</b> BAYSHORE DR.								
	ITE 2410		82 Street	t Address (P.O. Box Number is Not Acceptable)					
	AMI FL 33131		83						
1411/									
			84 City	FL	85 Zip Code				
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-name	d corporation submits this statement for the purpose of c	hanging 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	Signature, typed or printed name of registered agent	and title if applicable (NOTE Re	ogistered Agent signatu	re required when reinstating) DATE					
12.	OFFICEHS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTORS IN 12				
TITLE	P	☐ DELETE	1.1 TITLE		【 Change □ Addition				
NAME	CASTRO, CARLOS ALBERTO		1.2 NAME						
STREET ADDRESS	1001 S BAYSHORE DR #2410		1.3 STREET ADDRESS	1200 Brickell Avenue, #1	440				
CITY - ST - ZIP	MIAMI FL		1.4 CITY-ST-ZIP	HIAM!, FL 33131					
TITLE		☐ DELETE	2.1 TITLE		Change Addition				
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET ADDRESS						
CITY-ST-ZIP			2. 4 CITY - ST - ZIP						
TITLE		DELETE	3.1 TITLE		Change  Addition				
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP			3.4. CITY - ST - ZIP						
TITLE		☐ DELE <b>te</b>	4.1 TITLE	L	Change Addition				
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY-ST-ZIP						
TITLE		☐ DELETE	5.1 TITLE		Change Addition				
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS	1 16 2 (1					
CITY-ST-ZIP		TT :	5.4 CITY - ST - ZIP						
TITLE	,	☐ DELETE	6.1 TITLE	90000250986	hange Addition				
NAME			6.2 NAME	-05/04/980108804:	1				
STREET ADDRESS	•		6.3 STREET ADDRESS	***150,00					
CITY-ST-ZIP	north, that the information a malind with	s this filing dogs not suglify for the	6.4 CITY-ST-ZIP	led in Section 119.07(3)(i), Florida Statutes. I further cert	ify that the information				
indicated	on this annual report or supplemental.	annual report is true and accura	ate and that my si	ionature shall have the same legal effect as if made unde	eroath that I am an I				
officer or director of the corporation or the receiver or trusted of mpowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Biock 12 or Block 13 if changed, or on an attachment with an address									
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