

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

FILED

May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000033413 (4)

1. Corporation Name
GOLDEN LAND, INC.



Principal Place of Business

8420 NW 160 ST.
OKEECHOBEE FL 34972
US

Mailing Address

8420 NW 160TH ST.
OKEECHOBEE FL 34972-8463
US

3. Date Incorporated or Qualified: 05/10/1993
3a. Date of Last Report: 04/23/1996

2. Principal Place of Business

21 8420 N.W. 160 St.
Suite, Apt. #, etc.

2a. Mailing Address

26 8420 N.W. 160 St.
Suite, Apt. #, etc.

4. FEI Number: 65-0409627
Applied For: Not Applicable

City & State

23 Okeechobee, FL
Zip: 34972 Country: U.S.

City & State

28 Okeechobee, FL
Zip: 34972 Country: U.S.

5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

24 34972

25 U.S.

29 34972

30 U.S.

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

GAITAN, JUAN P
8420 N.W. 160TH STREET
OKEECHOBEE FL 34972

10. Name and Address of New Registered Agent

81 Name: Calle, Jenaro
82 Street Address (P.O. Box Number is Not Acceptable): 8420 N.W. 160 St.
83
84 City: Okeechobee, FL
85 Zip Code: 34972

11. Pursuant to the provisions of Sections 607.05(2) and 607.1508, Florida Statutes, the office agent

SIGNATURE: *[Signature]*
DENARO CALLE

[Signature]
ROSA HELENA CALLE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	TRUJILLO, JUAN JOSE	
STREET ADDRESS	12300 HWY 70 WEST	
CITY-ST-ZIP	OKEECHOBEE FL 34974	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	DE PALACIO, ROCIO CALLE	
STREET ADDRESS	12300 HWY 70 WEST	
CITY-ST-ZIP	OKEECHOBEE FL 34974	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	GAITAN, JAUN P	
STREET ADDRESS	8420 N.W. 160TH STREET	
CITY-ST-ZIP	OKEECHOBEE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Calle, Jenaro	
1.3 STREET ADDRESS	8420 N.W. 160 St.	
1.4 CITY-ST-ZIP	Okeechobee, FL 34972	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Trujillo, Juan J	
2.3 STREET ADDRESS	8420 N.W. 160 St.	
2.4 CITY-ST-ZIP	Okeechobee, FL 34972	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Calle, Rosa Helena	
3.3 STREET ADDRESS	8420 N.W. 160 St.	
3.4 CITY-ST-ZIP	Okeechobee, FL 34972	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	MD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Gaitan, Juan Pablo	
4.3 STREET ADDRESS	8420 N.W. 160 St.	
4.4 CITY-ST-ZIP	Okeechobee, FL 34972	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 do 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: *[Signature]* PG... MA 1/29/97 (941)4674883

CR2E034 (9/96)