


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000093746 1. Entity Name GOLDEN FENCE COMPANY, INC.	
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Principal Place of Business 13175 SW 124 AVE MIAMI, FL 33186	Mailing Address 13175 SW 124 AVE MIAMI, FL 33186
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02082004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0874219	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

PYLES, RICHARD B
 20343 OLD CUTLER RD.
 MIAMI, FL 33189

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signatures, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	GARCIA, MEILY
STREET ADDRESS	18325 SW 1045 AVE
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	VP
NAME	PERAZA, LUIS
STREET ADDRESS	18325 SW 145 AVE
CITY-ST-ZIP	MIAMI, FL 33177
TITLE	S
NAME	AQUILAR, SELVIN A
STREET ADDRESS	1140 WEST 25 ST APT #2
CITY-ST-ZIP	HAIALEAH, FL 33010
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000050404
 02/16/04-80009-011 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Meily Garcia 2/9/04 305 233-1666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #