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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K35631

(6)

GOLDKUP INVESTMENTS, INC.

Principal Place of Business Mailing Address							
% E. I. GOLDBERG 7141 LIONS HEAD LN BOCA RATON FL 33496		% E. I. GOLDBERG 7141 LIONS HEAD LN BOCA RATON FL 33496-59			:-		
				3. Date Incorporated or Qualified 09/30/1988	3a. Date of Last Report 02/05/1996		
2. Principal Pl	2a, Marling Address	ng Address		4. FEI Number	Applied For		
Suite, Apt.	#. etc	Suite. Apt. #. etc.	Suite, Apt. #. etc.		65-0073759	Not Applicable \$8.75 Additional	
22		27	····		5. Certificate of Status Desired	Fee Required	
City & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip			Count	<u>.</u>	8. This corporation has liability for intangible tay under s. 199.032,		
24	25		30		Florida Statutes Yes No		
					10. Name and Address of New Re	gistered Agent	
GOLDBERG, EARL I.			6	Name			
	1 LIONS HEAD LANE CA RATON FL 33496		82 Street Addre		fress (P.O. Box Number is Not Acceptab	le)	
BUL	A RATUR FL 33480		8	3			
			s.	1 City		85 Zip Code	
				<u> </u>		<u>FL </u>	
office or r	to the provisions of Sections 607.05t egistered agent, or both, in the State m familiar with and accept the oblig	e of Florida. Such change was a	authorized I	by the corpora	rporation submits this statement for the pation's board of directors. I hereby acception	or the appointment as registered	
SIGNATURE	Signature, typed or protect name of registered ap-	sent and tag if applicable (NOTE	Registered A	gent signature requ	uired when reinstating)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12	
TITLE	DST	DELETE 1.1 F				Change Addition	
NAME			1.2 NAM				
STREET ADDRESS				ET ADDRESS			
CHTY-ST-ZIP			1.4 CITY			Change Addition	
TOTLE	DODUM TIFODODE		2.1 TITLE	i		Change L Addition	
NAME PERSON NO COLOR	3760 INVERRARY RR		2 2 NAM				
STREET ADDRESS	LAUDERHILL LF		2.4 CITY	ET ADDRESS			
TITLE			3.1 TITLE			Change Addition	
NAME			3,2 NAM	.			
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY - ST - ZIP	3.4.		3.4. C(T)	- ST- 21P			
TITLE	☐ DELETE 4.11		4.1 TITLE			Change Addition	
NAMÉ			4. 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADORESS			
CITY - S1 - 7IP			4.4 CITY		TO STATE OF THE ST		
THLE		☐ DELETE	5.1 TITLE			Change Addition	
NAME			5 2 NAM]			
STREET ADDRESS	■			ET ADDRESS			
CITY-ST-ZIP TITLE			5.4 CITY 6.1 TITLE			Change Addition	
NAME		hand wants to	6.2 NAM			- sounds	
STREET ADDRESS				ET ADDRESS			
CITY-ST-712			6.4 CITY	1	•		
	by certify that the information supplie	ed with this filing does not qualif			ed in Section 119.07(3)(i), Florida Statute	s. 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

SIGNATURE: SINCHAL OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/47 8/9-42

FILED

Jan 23 1997 8:00am

Secretary of State