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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K35631

(6)

GOLDKUP INVESTMENTS, INC.

Mailing Address

FILED Jan 28 1998 8:00am Secretary of State



% E. I. GOLDBERG 7141 LIONS HEAD LN BOCA RATON FL 33496		% E. I. GOLDBERG 7141 LIONS HEAD LN BOCA RATON FL 33496		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 09/30/1988		
	lace of Business	2a. Mailing Address			4. FEt Number Applied For		Applied For
21 714 LIONS HEAD LN		26 SAME					Not Applicable
Suite, Apr. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required			
City & State RATON F		City & State		6. Election Campaign Financing Trust Fund Contribution	neing \$5.00 May Be Added to Fees		
Zip Country		Zip Country		8. This corporation owes or has paid the current year Intangible			
24 33			0		Personal Property Tax due June		□ No
00	9, Name and Address of Current	Hegistered Agent	81	Name	10. Name and Address of New Reg	pistered Agent	
GOLDBERG, EARL I. 7141 LIONS HEAD LANE							
	CA RATON FL 33496		82 Street Add		dress (P.O. Box Number is Not Acceptable)		
			63				
				0.7			
			84	City			lip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing 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 nume of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND		Registered Agen	t signature mqu	ulred when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	ODC IN 12
TITLE	DST	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICE	Chang	
NAME	LAPIN, ANDREW W.	_	12 NAME				,
STREET ADDRESS	300 W WASHINGTON ST		1.3 STREET A	ODRESS			
CITY-ST-ZIP	CHICAGO IL.		1.4 CITY-ST-	- ZIP			
TITLE	DP	☐ DELET e	21 TITLE			☐ Chang	ge Addition
NAME	BORKAN, THEODORE		2.2 NAME				
STREET ADDRESS	3760 INVERRARY RR		2.3 STREET A	DORESS			
CITY-ST-ZIP	LAUDERHILL LF		2. 4 CITY-ST	-ZIP			
TITLE	L_I DELETE 3		3.1 TITLE			Chang	je 🔲 Addition
NAME			3 2 NAME				
STREET ADDRESS			3.3 STREET A	DDRESS			
CITY-ST-ZIP		Dritte	3.4. CITY - ST	- ZIP			
TITLE		L_J DELETE	4.1 TITLE			L_J Chang	e LAddition
NAME CAREET ADDRESS			4. 2 NAME				
STREET ADDRESS			4.3 STREET A				
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-S1- 5.1 TITLE	ZIP		Chang	e Addition
NAME		L. DELETE	5.2 NAME			спану	E NOUIDOR
STREET ADDRESS			5.2 TRAVIL	nnoree			
CITY-ST-ZIP			5.4 CHY-ST-				
TITLE		DELETE	6.1 TITLE	£H		☐ Chang	e Addition
NAME			6.2 NAME			L 0.10.19	
STREET ADDRESS			6.3 STREET AL	DDRESS			
CITY-ST-ZIP			6.4 CITY - S1 -				
14. 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 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 13 if changed, or on an attachment with an address.							