

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90061 028 ***150.00

DOCUMENT # 319973

1. Entity Name

GOLDEN REALTY CORP. OF MIAMI



Principal Place of Business

C/O LERMAN AND LERMAN, P.A.
48 EAST FLAGLER STREET, PENTHOUSE 101
MIAMI FL 33131

Mailing Address

C/O LERMAN AND LERMAN, P.A.
48 EAST FLAGLER STREET, PENTHOUSE 101
MIAMI FL 33131



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number 59-1220444

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~BERMAN, ISIDORO~~ *Remain*
LERMAN AND LERMAN, P.A.
48 EAST FLAGLER STREET, PENTHOUSE 101
MIAMI FL 33131

Name *Lerman and Lerman PA*
Street Address (P.O. Box Number is Not Acceptable)
48 E. Flagler St (PH 101)
City *MIAMI* FL Zip Code *33131*

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	KOZOLCHY, BENNY	
STREET ADDRESS	48 E. FLAGLER ST. (101)	
CITY - ST - ZIP	MIAMI FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	LERMAN, ISIDORO	
STREET ADDRESS	48 E. FLAGLER ST. (101)	
CITY - ST - ZIP	MIAMI FL 33131	
TITLE	TD	<input type="checkbox"/> Delete
NAME	GORODETZKY, FELICIA	
STREET ADDRESS	8305 CRESPI BV	
CITY - ST - ZIP	MIAMI BEACH FL	
TITLE	AS	<input type="checkbox"/> Delete
NAME	LEAMAN, JORGE	
STREET ADDRESS	48 E FLAGLER ST PH 101	
CITY - ST - ZIP	MIAMI FL 33131	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Isidoro Lerman, Secy

3/2/07